Digital Health Impact on Health System Employer Partnership and Pop Health

Webinar showcases early takeaways from Scripps and Xealth's digital health partnership to boost population health and employer-direct patient engagement.





Introduction

It is a common theme in healthcare today. Scripps, an integrated health system with five hospitals and 30 clinical sites across San Diego, saw lagging patient engagement with the care services and digital tools being offered.

Presenting in a Dec. 8, 2022 webinar hosted by Digital Health Insights (DHI), Scripps' VP of Population Health and Chief Executive of ACO Tracy Chu said, "We knew that we had patients who were not taking advantage of programs or offerings that they were eligible for. We knew we had many disparate programs for different patient populations that made it virtually impossible for our busy clinicians to know what to offer, to whom, and when. We knew we did not have a mechanism to provide individualized care to our patients based on their current needs and their health plan. Also, we knew we were not as proactive as we'd like to be in managing our patient care."

After partnering with Xealth, which was founded to help organizations scale digital health, Scripps saw significantly better access and engagement with its targeted health apps and services in two key patient areas, population health and direct-to-employer members.

Chu noted Scripps is early in this journey but provided insights on its work with Xealth and some early successes from the partnership.

Improving Health Care for Qualcomm Employees

About five years ago, Scripps became the direct-to-employer provider for the Qualcomm employees that are part of their risk-based Accountable Care Organization (ACO) plan, specifically in San Diego, according to Chu. Currently, there are about 16,000 Qualcomm employees and their family members participating in this plan. "We have very high levels of customer service and access standards for these patients," she stated.

Qualcomm partners with third-party vendors, Lyra and Vida, to support their health coaching, diet/nutrition services, and behavioral health services to their members. However, patient enrollment and engagement with the programs and apps was low.

Part of the issue, Chu explained, was a disconnect between patients and clinicians—they often didn't know patients who were available for the Qualcomm benefits, so many patients were not enrolled in the programs.



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Chu said Scripps leveraged Xealth to proactively identify, educate, and communicate these offerings to the Qualcomm members. "Xealth allowed us to have easy access for our patients to also then register and enroll into these programs," she explained. "A very seamless, automated process that takes the clinician a little bit out of it and allows the system to really work to proactively send that information ahead of time."

Leaning on the joint efforts, including algorithms to identify eligibility, Scripps expanded the number of targeted patients and communicated directly with these patients via email—previously, patients had to physically visit Scripps to be identified.

"As a result, we've seen increased engagement and enrollment into the programs," Chu reported. "We know that once they're engaged and enrolled, these programs work."

Among the figures Chu displayed in the webinar, there was a 190% increase in enrollment in Vida and a 16% bump in Lyra enrollment, with page views also jumping 130% and 15% in these programs, respectively. The overall patient engagement conversion rate was 27%.

The lesson learned, according to Chu, is if you make it easy for the patients to access health programs and become educated about the value of them, their engagement increases. "Ultimately ... this is why we're doing what we do; it improves the clinical outcomes for those patients."

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Pop Health Focus: Expectant Mothers

MyScrippsBaby is a third-party app that provides education and adherence to care plans for Scripps' Qualcomm and other obstetrics (OB) patients. "While we knew the app was very valuable, and we've been using it for several years at Scripps, we were struggling ... to get patients enrolled and engaged in the app," Chu noted, adding the enrollment process required physicians and staff to manually enroll patients. "It also wasn't being rolled out very consistently across our clinics."

So, Scripps took away this manual enrollment responsibility from clinicians and staff by proactively sending patients education and information about the app ahead of their appointments.

It was important that these digital communications originate from the health system and care provider (via the patient portal and email), Chu stressed. "Patients trust us. They have a relationship with Scripps. They have a relationship specifically with the providers," she said, in response to an audience member's question. "It really enhanced visits, because they weren't spending all the time talking about the app; they actually got to spend time talking about their care."

Scripps' partnership with Xealth led to big improvements in enrollment (up 300%) and engagement (290%) within four months post launch.

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RPM for Diabetic Patients

Based on the enrollment and engagement successes, Scripps eyed its diabetes care population for similar improvements with its remote patient monitoring (RPM) via continuous glucose monitors (CGMs). "Like many organizations who are deploying the CGMs, we've been struggling with trying to integrate all the various devices and all the information that comes from those devices into one place and integrate that into the patient care record."

In this project, Scripps paired Rimidi, a platform that aggregates information from various vendors and devices, with Xealth's APIs (application programming interfaces) to bring the integrated information to Scripps. This provided clinicians the data they needed to identify patients easily and quickly for eligibility. This is a pilot project with a handful of clinicians; at the time of the webinar it was just a couple months go-live, so results are still pending.



In some ways, improved access and use of digital health programs is simple, according to Chu: Make it easier for the patients, for the providers and the staff, and the engagement will follow. However, there are many factors to consider toward reaching this simple goal.

Scripps first prioritized programs and relationships already in place, leading to the Qualcomm program and an existing maternity app as its initial use case. "We had a really close relationship with the [Qualcomm] leadership there, the benefits team, and we knew that they had high expectations of service and experience for their members," Chu explained. "We knew that we would get real-time feedback on what was working and what was not working with these programs."

Then, Scripps focused on removing known barriers, like manual processes, to customize the use of Xealth to target enrollment and engagement challenges.

Also, keeping all the members of the team involved was crucial, Chu assured. "It's not an IS project. It's not an operations project. It's not a population project. It's not a physician project. You've got to create a structure initially to have all those folks involved in a governance process that ensures integration of work at all levels."









Clearly defined, simple and targeted KPIs helped Scripps know how this intervention would improve certain indicators of success. "Sometimes we take too much time to try to measure too much," Chu noted. "We want to make sure this was very simple."

Finally, Scripps knew it needed to ensure there was a remote, robust internal communication strategy so that every level and every tier in the organization knew the value of the project.

Scripps partnered with a third-party vendor because they knew it was imperative to their success. Chu said Xealth brought a functionality that helped Scripps answer three key questions:

How do we make the health system easier to navigate and the population health and care programs we currently have easier for patients to access?
How do we make the processes for our clinicians to match our patients to the right level of care at the right time easier?
How do we automate and create efficiencies in our systems, given so many programs and care options?

Even with a strong outside partner, Chu reminded internal operational leaders that workflows must be front and center in this work. "It's all well and good to have a great solution like Xealth, but if your teams aren't bought in and it creates more work for them, it will fail."

Aaron Sheedy, COO and co-founder of Xealth, pointed out Scripps was in an ideal position to succeed with the project due to strong IT and IS staff, great clinical leadership, and patients who want to engage digitally across a range of demographics. Another crucial factor he found in Scripps is strong governance. "We find a lot of systems getting stuck on governance, and it's just really good to see a system think about it strategically and operate a digital health formulary in the way that we think it should be operated," he said.



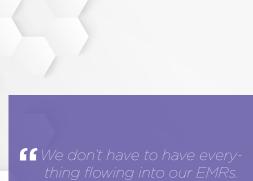


In a panel discussion with Loren Pettit, VP of analytics for Digital Health Analytics and CHIME, both Chu and Sheedy advised that while perfect integration of all available data into a system's electronic records is often touted as the goal, it isn't necessary to see such positive results on engagement.

"We don't have to have everything flowing into our EMRs," Chu said. "What we do need to do, though, is to make sure that what is flowing in makes sense."

The EHR is one of the most expensive places to put data, noted Sheedy. "Just put the right piece that actually needs to be there, either for quality metrics, or governance, or because it needs to be in the legal medical record," he suggested, noting partners like Babyscripts, Rimidi and others have already done a really nice job of visualizing the data. "We can display all the data in one screen: You can go in and click and see exactly how the mom's doing on Babyscripts; you can check her blood pressure; you can check her readings; you can check everything that Babyscripts knows about her and see it all in one dashboard."

Another caveat is the financial ROI may not be clear or immediate. "The improved expenses or total cost of care isn't always evident, and it usually takes a while for you to see results," Chu stated, during the panel discussion. "Having an impact on our diabetic patient population today may not actually yield results for a couple of months or years, and you're not going to see that [for some time]."



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In the discussion, Sheedy noted many health systems are vying to win back patients and compete against new healthcare players, and "digital" is just a part of health now, not its own entity. "We want to work with systems that are tired of having a digital health strategy and actually want to have a digital health journey that they can engage both their own C-suite on ... and then weave that back into the organization," he said. "It's not just one group. It's not just your innovation group going off and doing a pilot with Babyscripts or Rimidi. That's not enough."

Chu added having top leadership on board provides a north star and a framework to anchor the work. "We also look from the ground up," she said, explaining it must work for the patient. "Sometimes, if it's too top down, by the time it gets to the front lines from the patient to the clinicians, it's a strategy that has absolutely no success, no ability to succeed because it doesn't work in the real day to day environment. You've got to match the two [ends]."

The Scripps use cases with Xealth show how much can be accomplished in a relatively small amount of time when the project is focused on key metrics—enrollment and engagement in these cases and key elements are in place, including full team buy-in, governance, patients eager for digital tools, and realistic expectations on the value or return.

Sheedy highlighted the upside: "Generally speaking, the more digitally engaged the patient is with you, the health system, the better, the more loyal they're going to be, and the healthier they're going to be."

The webinar is available on demand at Digital Health Insights.

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Access Webinar



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