WellNet Interactive Takes Employee Wellness to the Next Level
Integration, Incentives Boost Participation and Reduce Health Plan Costs
Introduction

Organizational wellness initiatives are among the hottest buzzwords in health care these days. Yet, as a growing number of companies grapple with the challenges of adopting wellness programs that yield measurable gains, two key success factors stand out: integration and incentives.

Southampton, Pa.-based WellNet Interactive’s mission is to help employers leverage integrated technology, customized member engagement strategies and employee incentives to improve the health of their employees, while also reducing the skyrocketing cost of health-care benefits. Most industry experts believe that the success of an organizational health management program is directly tied to employee participation in that program. The twin challenges for most companies developing such plans is how to drive employee participation and how to measure the success of their programs in terms of improved health outcomes and reduced plan costs.

That’s why WellNet takes a holistic approach toward helping organizations develop wellness and health-management initiatives. That approach uses advanced technology and data analytics to identify at-risk segments of the member population, translate that data into wellness initiatives that can identify and manage risk, use incentives to encourage employee participation, and apply credible metrics to quantify bottom-line benefits.

“I look at that on two levels,” explains Judy Mueller, WellNet Interactive president. “We have two primary objectives: 1) engaging the members in meaningful dialogue that points to improvement in health status; and 2) having an impact on medical expenses — and that’s what the CFO, CEO and the executives in the human resource department are going to be concerned with.”

Improving health outcomes is an important issue for Mueller, a licensed registered nurse with a background in critical care medicine and 20+ years of experience with insurance, reinsurance and medical management organizations. From an organizational standpoint, WellNet’s goal is to reduce medical expenses and stabilize
medical trends over time. For individual members, the goal is to create good health outcomes for them and their families. To accomplish both goals effectively, wellness initiatives must go beyond the traditional approach of addressing acute or chronic disease management — they must also broaden an organization’s focus to identify risks in time to do something about them. And that means leveraging data across the entire member (employees and their dependents) population.

“If you widen the net of people that you can draw from and you can get those members to participate at a high level with the wellness strategies and on a 1:1 basis with our care managers, the ultimate outcome is going to be good for the member and for the employer,” says Mueller. The technology and data analytics help us identify members with a unique set of medical conditions and structure outreach strategies based on that member’s needs and expectations. We pay special attention to how members learn and internalize health-care information, what the culture of the company calls for and how to best communicate with both. Taking the time to really understand this helps us to customize our approach and reaps the optimal in participation rates and ROI. In turn, not only will the health outcomes of individual members be improved because they’re based on unique medical concerns, but the employer will also be able to generate better health outcomes for its employees at a lower cost.

“And that’s really what our mission is, to create savings for the medical plan in terms of reduction [in health problems] and expenses, as well as stabilization of the trend over time — and then good clinical outcomes for the members,” Mueller says. “These are not mutually exclusive — they actually work hand in hand.” Indeed, better outcomes drive reductions in medical costs because when members are healthier and more productive, organizations will have fewer workers’ compensation issues and lower medical expenses over time.

“And I emphasize over time, because it does take time for all this to work,” Mueller says. “Our advantage lies in our technology and analysis, which allows us to be more proactive and accelerate the performance cycle. For us, it’s a high tech/high touch approach to health management, and it works.”
The Power of Analytics

The perennial challenge for health-care management programs has been to understand the unique conditions and risks for a patient or member population while remaining HIPAA-compliant in accessing and analyzing that information. WellNet has developed strategies, methodologies and an innovative technology platform that can access all kinds of data elements in a manner that complies with regulations on health-care privacy.

From there, WellNet uses sophisticated predictive modeling technology to look at an employee population and identify very specific risks within that population. “Once you know what those risks are, you can develop a plan of care that involves not only the member, but the physicians in most cases,” says Mueller. “And then you can develop a customized approach to help the member manage his or her unique set of medical conditions, which has been identified through the data in a much more effective way.”

This is important because chronic disease is a root of rising health-care costs. And many of the health risks associated with chronic disease — smoking and obesity, for example — are at least partially preventable. For that reason, a targeted outreach approach driven by real data can have a far greater impact on employee health outcomes than stand-alone wellness programs.

“The data really drives that,” Mueller says. “One of the things that differentiates our program from other stand-alone disease management companies is the fact that we look at a very broad and comprehensive picture because of the way the data is analyzed through our modeling technology. So many disease-management companies just focus on diseases — there’s nothing wrong with that — but from our perspective, it’s much more effective to be able to see the full picture. And instead of focusing on a disease, our process homes in on members at risk.”

The Role of Incentives

But once those at-risk members have been identified, how do you encourage participation in such targeted wellness initiatives aimed at mitigating that risk? WellNet’s approach is to work with employers to develop a variety of incentives that are consistent with the corporate culture and likely to motivate employees to participate in these programs. These incentives can run the gamut from gift card programs to reductions in premium contributions.

Incentives can make a huge difference in employee participation rates. While the national benchmark of employee participation rates hovers around 30 percent, incorporating incentives can dramatically improve results. Lower-cost incentives such as gift cards are a great approach for companies to take in the first year of a wellness program, but a sustainable program will have higher participation rates if incentives affect employees’ premium contributions. “I have a number of employers that tie engagement with the care manager and compliance with wellness programs to a specific dollar value for reductions in premium contributions,” Mueller says.

“What we’re seeing in our program is that in a nonincentive group, you have an average of about 37 percent participation rate, which is really good,” Mueller continued. That’s a big improvement over the 5 to 10 percent rates achieved in a typical carrier-based or stand-alone disease-management program. “But when premium-based incentives are in place, the participation rate can really be increased dramatically,” she says. “We’re seeing anywhere from about 57 percent all the way up to about an 89 percent participation rate.”
There are a number of critical success factors that go into achieving a participation rate that high. “One is our care management process itself, which is extremely proactive, very much in line with an advisory service,” Mueller says. “In our care-management process, we’ve been able to marry the best elements of health coaching and true care management. So I think the combination of those two factors really inspires and supports strong member engagement.”

With all the key elements of a wellness management strategy working in tandem — information, analytics and employee engagement — organizations are well positioned to drive better health outcomes and optimize their health-care costs. However, one more critical success factor is endorsement from an organization’s leadership, Mueller points out. “We work at creating strong relationships with the clients, but we have also been enjoying extremely supportive executive management endorsements for our program,” she says. “Combining those two items has surely driven the participation rates that we’ve been able to achieve.”
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