

Getting Personal: Five Imperatives For Real Consumer Health Engagement

People are more than their conditions or diseases. They are moms and dads. They are caregivers. And so much more.



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As seen in the blog *Getting Better*, a collection of insights and perspectives from Accolade and others who are helping transform the consumer healthcare experience and outcomes for the better.

Diabetes. Breast cancer. Low back pain. Depression. ER frequent flier. Words and phrases like this have been used for years to segment the population into manageable groups for the right messages and the right interventions. It's how data is typically collected and analyzed; it's how the health system typically thinks about targeting and intervening.

But a person is so much more than their condition or disease. They are people. They are moms and dads. They are caregivers. They are professionals, unemployed, and retired. They have fears and dreams. They have names. And a new model of healthcare is emerging that recognizes that health is more than any one thing, it's about a person's total life and social context as well the injury or illness they are battling.

This new model starts with using human-to-human interaction supported by technology and data to get the care that's uniquely right for them, at the right time. But how do you operationalize something so personalized on a large scale and in a way that makes real impact? Accolade, has been working on this very problem with some of the most innovative employers, health plans, and health systems in the country. Here's how we've approached it and what we've learned.

We realized early in our journey that you can't make

it about the person if you don't get personal. So, the cornerstone of this "real" engagement model is giving consumers their own personal health assistant — someone who knows them, can simplify the healthcare complexity, and who is on their side to help them get the care they need.

Health assistants serve as lighthouses in the healthcare storm at a time when individuals or their loved ones are ill or injured and most vulnerable. They answer questions about benefits coverage, translate complicated claims, review bill accuracy, find the right providers, explain treatment options, prepare questions for doctor visits, coordinate care and more. Their goal is to do what's right for the consumer so that they get the right care in the right setting the first time and avoid hassles and costly errors that result from bounding around the system. This results in better clinical outcomes, lower costs for the consumer and their plan sponsor, and less time spent away from their jobs or their families.

Based on more than five million consumer interactions, we've identified five key imperatives to get to real engagement. By adopting this approach, organizations looking to truly transform their engagement and savings results will flip the consumer engagement model on its head — allowing them to reach the entire population rather than small sub-sets.

- 1. It's about them, not about you.** Give consumers a service they want, not what you think they need. They want one place to go for all health and benefits questions. You can make it easy for them to access by giving them one person with one phone number and website. And, you can make it more personal by building relationships with them that allow you to understand their needs, values, preferences, their health and emotional needs and life context.
- 2. Care is a process that can be managed.** Consumers are infrequent travelers in this strange land of healthcare, which is fragmented and challenging to navigate in the best of circumstances, and nearly impossible to do alone when someone is sick, anxious, or scared. Consumers need to access two different systems: One for health benefits and one for care delivery. Both are extremely complex and require in-depth knowledge and support from a trusted expert resource to be navigated effectively.
- 3. Every person is a segment of one.** One-size-fits-all doesn't work for effectively influencing healthcare decisions. You can't treat everyone with the same condition in the exact same way. To effect behavior change, you need to address the segment of one: The unique person going through a unique healthcare journey.
- 4. Technology optimizes human intervention.** Human interaction and technology must come together working in concert to treat the individual based on the contextual factors. Having the right data and analytics easily accessible is essential to predict and address process errors before they happen. Just as important is having the right consumer facing and professional technology that makes it easy to connect regardless of what device each is using.
- 5. The goal is action — not simply interaction.** Ultimately, engagement and influence have to lead to action. Focusing on the decision-making process is one thing, but what really counts is execution and follow through. Every consumer interaction is an opportunity to engage, educate and influence. For lasting impact, the person needs to change the way they see themselves and have strong emotional motivators to reinforce the change. Helping people take small, manageable steps can lead to a big leap forward in achieving their goals.

We know this approach works. At Accolade, we have shown that by reaching 70 percent of all families in a population who represent 90 percent of the healthcare spend. We have found that by engaging employees earlier and more comprehensively, we are able to help companies save 5 to 15 percent in healthcare costs while significantly improving the quality of care and driving world class satisfaction rates.

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That's because all decision points along the health benefits and healthcare continuum matter, and can help build a more complete portrait of the consumer: A question about a bill matters, a need to find a provider matters, a discharge inquiry matters. It's not just about consumer self-service for one specific question.

Taken together, this is “real” engagement — and it all starts and ends with the consumer. ●

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Getting Better

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