



Maximize End-of-Year Performance and Prepare for 2025

September 2024



Meet Healthmine

The industry's leading member engagement solution



Markets we serve

Medicare

Medicaid

D-SNP

Commercial

FEP

ACA

Today's Presenters

MODERATOR



**Brett
Rudisill**

SVP, Marketing

PRESENTERS



**Mallory
Mueller**

VP, Population Health
and Equity



**John
Willis**

VP, Consulting and
Professional Services

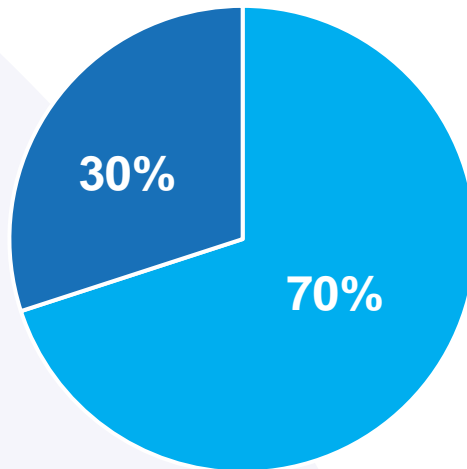


**Chris
Gage**

Director, Product
and Experience Strategy

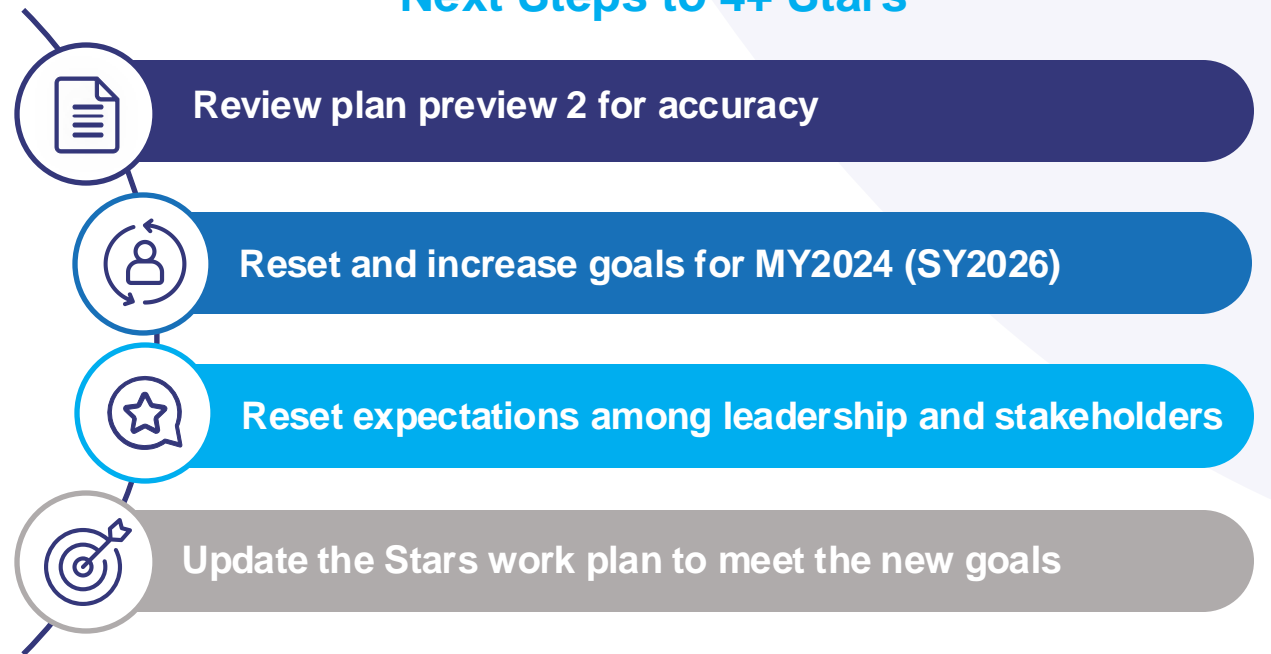
SY2025 Plan Preview 2 Preliminary Results

SY2025 Cut Points



- Measures with increased cut point
- Measures with same or lower cut point

Next Steps to 4+ Stars



- Increased cut points across majority of Stars domains.
- Time to reset goals, assess interventions and make a final push for SY2026.

Overcome Q4's Biggest Challenges

Last chance to reach your goals before the end of the year

High claims costs and low medication adherence rates negatively impacts MLR

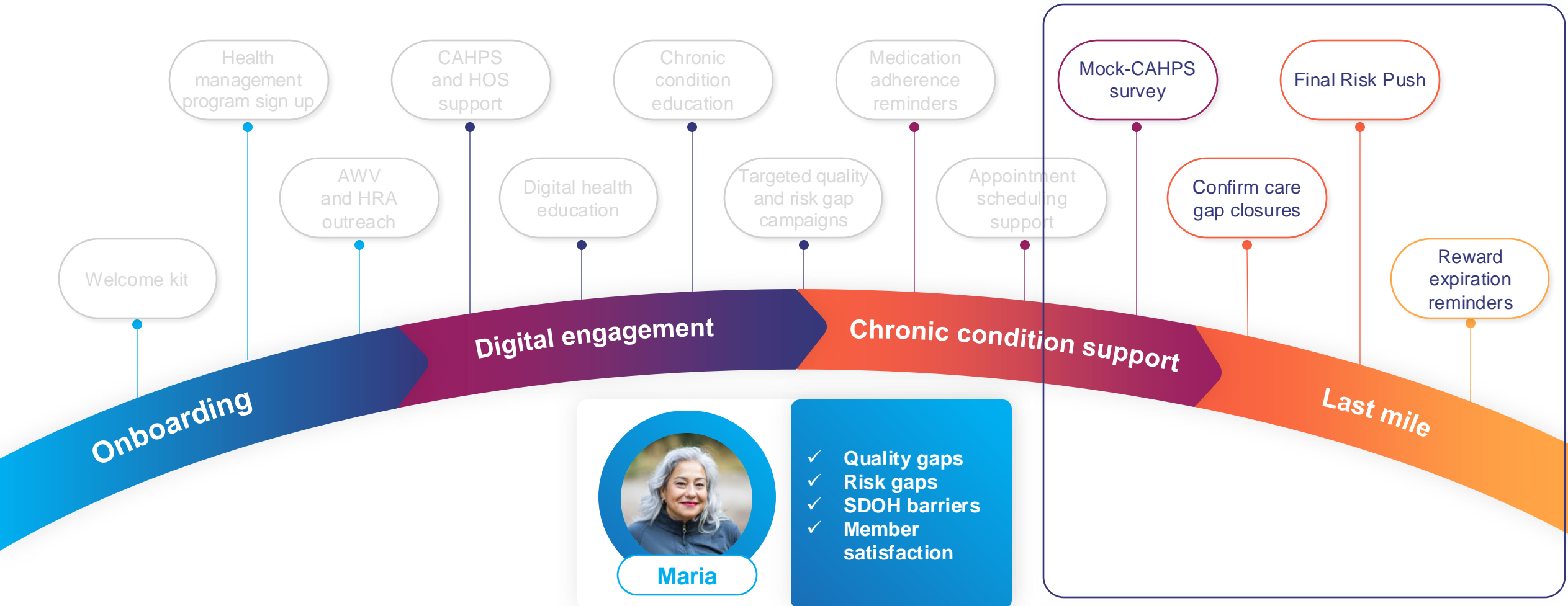
Fewer chances to increase member retention and close risk and quality gaps

Limited time to improve member experiences before Open Enrollment and the next CAHPS survey

**Strategic, fast
and targeted gap
closure initiatives
are the key to
EOY success.**

A Coordinated & Compliant Approach

Guide members on a holistic and personalized care journey



Achieving Success with a Final Push

Star measure additions

- Kidney Health Evaluation (KED)
 - Have provider clinical protocols been updated?
 - Are members compliant with one test but not the other?
- Maintaining and improving physical and mental health HOS measures (1-weight for 2026)
 - Survey currently fielding have you identified at risk members?
 - What member engagement techniques did you implement and how are you measuring their success?

Measure changes

- Diabetes blood sugar control
 - Major denominator change, should be assessed prior to end of year.
- Colorectal Cancer Screening (COL)
 - Removal of hybrid medical record review
 - Did you maximize in year data collection and interventions?
- CAHPS member experience reduced from 4-weight to 2-weight

Annual Wellness Visit (AWV) completion rates

- Is this rate higher than last year?
- Is there an access or availability concern?

In what way do these changes influence your potential to achieve quality bonus payments for Star Rating 2026?

Member Experience

Best practices for successful CAHPs performance

Timing

- Regulatory CAHPS survey begins in the first quarter of 2025
- Members will remember the communication received during Q4
- Outreach that is uncoordinated can cause confusion and members may not understand the call to action
- New member onboarding in Q1

Messaging

- Develop consistent, relevant and helpful content to members to maintain trust
- Use large fonts, images, simplicity and easy to follow content. Checklists provide a lift of more than **5%**

55% of members are not fully satisfied with their health insurance

Identification

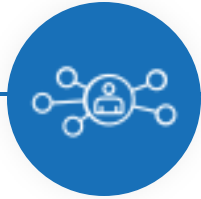
- Conduct quick short surveys to assess member satisfaction now
- Consider data sources that may contain member experience data
- Follow-up and service recovery efforts to mitigate any dissatisfaction

The Impact of a Positive Member Experience

Key factors influencing member satisfaction



**Personalized
communication**



**Omnichannel,
multilingual outreach**



**Incentives for healthy
behaviors**



**Member feedback
action**

9-15

A dissatisfied member will tell between 9-15 people about their experience.

4X

A customer is 4 times more likely to go to a competitor if the problem is service-related, rather than price- or product-related

12

It takes 12 positive experiences to make up for one unresolved negative experience

<https://www.linkedin.com/pulse/15-statistics-should-change-business-world-havent-pranit-banitha/?trackingId=QKQp59osRKeLjcC28WvBAw%3D%3D>

Address High-Value Targets

Guide initiatives with behavioral-science backed campaigns

- Segment outreach lists
- Customize EOY campaigns
- Consolidate outreach and internal lists screening for:
 - ✓ Health statuses
 - ✓ Open quality gaps especially those that are higher weight or lower performing
 - ✓ Encourage AWW
 - ✓ Uncoded chronic conditions
 - ✓ Disabilities
 - ✓ Member satisfaction
 - ✓ CAHPS dispositions
 - ✓ HOS responses
 - ✓ Housing, transportation and food insecurities
 - ✓ Social determinants of health
 - ✓ Race and ethnicity
 - ✓ Language preference
 - ✓ Gender identify and sexual orientation

According to a 2023 study by the Veterans Health Administration, on average each additional in-person primary care visit was associated with a total cost reduction of \$721 per member per year.

Gao J, Moran E, Grimm R, Toporek A, Ruser C. The Effect of Primary Care Visits on Total Patient Care Cost: Evidence From the Veterans Health Administration. J Prim Care Community Health. 2022 Jan-Dec;13:21501319221141792. doi: 10.1177/21501319221141792. PMID: 36564889; PMCID: PMC9793026.



Maximize EOY Care Gap Closure

Proactively engage members through live, bilingual agents

- ➔ Launch campaigns in four weeks with enough time to improve plan performance
- ➔ Target high-priority care gaps, time-sensitive measures and non-compliant members
- ➔ Customize campaigns to achieve plan goals:
 - Schedule appointments
 - Manage medication
 - Complete health risk assessments and SNS-E screenings
 - Resolve member challenges
 - Welcome new members to plans

Streamline Your EOY Push

Tackle Q4 challenges with fast and targeted solutions

Outbound Calls

Engage members in closing care gaps with live agents and thank them for being members.

Pulse Surveys

Surface insights into member behaviors and sentiment through customizable surveys.

Interactive Voice Response (IVR)

Facilitate meaningful interactions with members through low-cost IVR call campaigns.

Fill Member-Level Data Gaps

Identify member pain points with Pulse Surveys and IVR in time to improve experiences



Rapidly collect feedback on member experiences, needs and preferences



Choose from multiple, pre-built questionnaires or design your own with engagement experts



Survey members through emails, text messages and IVR



Interpret results with Account Managers to inform next best steps



Best Practices

Member engagement during Q4 push

Communications

- **85%** of member want their health plans to honor their communication preferences
- If possible, use digital channels to allow enough time for the member to close their identified gap.

Content

- Use of the behavioral science principle, Loss Aversion, in an email subject can increase open rates by more than **15%**.
- Copy developed to overcome barriers, using proven behavioral science principals to drive desired outcomes. - "Time is running out!" - "You can still earn \$X"

Target

- Highly targeted campaigns increase opt-in rates by **10-15%**.
- Focus on members who have historically engaged but still have open care gaps.

Personalization

- In healthcare, personalization lifts response by more than **20%** depending upon the tactic.
- Prioritize the most important gap for that member and provide a simple call to action.
- CAHPS and member experience weights are reduced for Star Rating but should remain high priority for plans due to direct tie to member retention.

Patient experience, complaints, and access measures move from approximately 58% of the overall Star Rating to 40%. The impact will be felt in other domains.

Strategizing for Plan Year 2025

Stars 2027

- Health Equity Index
- New Part D measures
 - Concurrent Use of Opioids and Benzodiazepines (COB)
 - Use of Multiple Anticholinergic Medications (Poly-ACH)
- Clinical measure changes
 - Removal of Care of Older Adults (COA) pain measure addition of Care of Older Adults (COA) functional status assessment measure

Prepare

- New supplemental benefit requirements
- Medicare Prescription Payment Plan (M3P)
- Other health equity regulatory changes

Health Outcomes Survey (HOS)

- Maintaining and improving physical and mental health 3-weighted.

These returning measures will increase the HOS composition of the **Star Rating from 3% in SY2026 to 12% in SY2027**. CMS is also considering adding an additional HOS with a 3x-weight related to Activities of Daily Living.

Plan

- Consider starting early in the year to create a continuous care experience versus a Q4 push.
- Socialize information with key stakeholders at your organization, encourage interdepartmental communication, and foster teamwork between departments.
- Make sure you have a structured approach to address and resolve any concerns.

Maximizing Q4 Value

Closing critical gaps

Digital First

- Easier to measure with immediate results
- Most efficient and fast to market
- More cost effective, offering ~40% cost savings
- Condense lists and make efficient outreach

Adhesive Approach

- Ongoing holistic, continuous communication providing clear calls to action
- Providing additional ways to engage, increasing engagement
- Recency of contact or engagement with members has a direct tie to improved member satisfaction

Prepare for 2025

- Helps to set up Q1 for success with HRA, AWW and CAHPS
- Reduces churn as members are recognized and rewarded for their actions
- Increased engagement will carry through to 2025



Contact

Mallory Mueller BSN, RN

Vice President of Population Health & Equity

Mallory.Mueller@Healthmine.com

Chris Gage

Director of Product & Experience Strategy

Chris.Gage@Healthmine.com

John Willis

Vice President of Consulting & Professional Services

John.Willis@Healthmine.com



Healthmine.com