



Moving EAP into Health 2.0 World

Rich Paul, MSW, CEAP

Northern Illinois Employee Assistance Professionals Association
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What was said in 2006

The EAP profession is currently in transformation. Those who get caught in the past and resist change will be forced into commoditization. Those who can create value through leadership, relationships and creativity will transform the industry, as well as strengthen relationships with existing clients.

What was said in 2006

Needs continue to grow and change. Customers look to the EAP provider to handle the needs. As they ask for more service, a provider wants to say, "you have to pay for each of the services," but there is always someone right behind saying, "I will do it all," so the services required goes up and what you can charge stays the same or goes down...thus commoditization. The solution is to move from analog to digital. Jobs and functions need to be standardized, digitized and made easy to perform.

So what was ahead for EAP in 2006?

1. Change is the norm
2. Traditional EAP is a commodity
3. Internet service delivery increases
4. Less face to face services
5. Predicting workplace needs
6. Free EAP
7. Virtual service delivery

So what was ahead for EAP

8. Health plan dominance
9. Consumer driven services
10. Coaching will flourish
11. Health and wellness offerings
12. Disease management partnerships
13. Outsourcing will increase
14. Move towards a proactive approach

So what was ahead for EAP

15. Productivity focus
16. International development
17. Risk management
18. Data analytics
19. Partnering for service delivery
20. Operations technology
21. Proof – measure effect of service

So what was ahead for EAP

22. eLearning
23. Absence management
24. More service to more people for less cost
25. EAP becomes a small part of big picture
26. Industry consolidation

2016 and beyond is all about technology

- Review the Health 2.0 and technology landscape impacting behavioral health and EAP
- Share a strategic framework for thinking about technologies that influence outcomes
- Discuss recommendations for screening new technology ideas and how to vet technologies for potential deployment

Health 2.0

- Revolution
- Tech driven collaboration
- Integration of work flows
- Adaptable tech
- Consumer driven, user experience
- Data driven
- Simple, quick and easy user experience

Today we are faced with a real set of challenges that technology can address

- HC tech products are coming from everywhere; every day a new tech launches focused on HC (many with no HC expertise)
- Improving engagement is a universal objective
- We all seek to improve participant outcomes in a cost-effective and meaningful way
- We need to address generational preferences as to how individuals engage in and receive services

Current Trends

“Global mHealth ecosystem worth \$16b by 2016, CAGR 40% over 5 years” – 68% is Patient Outreach

- Research and Markets

“65 percent of consumer transactions involving healthcare will make use of a mobile device by 2018”

- IDC Health Insights

“Mental Health cost businesses more than \$440 billion each year”

- PWC, Emerging healthcare trends, 2015

“Healthcare Internet of Things market segment is poised to hit \$117 billion by 2020”

- MarketResearch.com report

Current Trends, cont...

“Over 90% of individuals worldwide have access to mobile phone services, totaling about 6.8 billion mobile phone subscriptions worldwide”

“There are over 1.4 billion smartphones in the world, and smartphone access is expected to triple globally to 5.6 billion by 2019”

“Internet and mobile access is also high and growing among even the most traditionally underserved and vulnerable populations”

We can broadly group healthcare technologies into eight categories

Technology segment	Segment description	Example companies
Computer-based CBT	On-line programs designed to solve behavioral health problems and change unhelpful thinking and behavior	MyStrength, Empower, Dartmouth, Self-Help Works
Online counseling (chat, telehealth, email)	Computer-based alternative delivery method for counseling/therapy/follow-up, etc.	IESO, American Well, Teladoc, DoctorOnDemand
Online social network	Use of internet to connect individuals with similar behavioral health issues and concerns and provide virtual support systems	Big White Wall, PatientsLikeMe, OneHealth
Mobile platforms for self-tracking and support	On-line tools designed as educational and support resources to increase self-awareness/self-efficacy	LifeWIRE, ORCAS, Polaris
Gaming	Specialized applications on BH issues in a game format	OWLS
Virtual reality	N/A	N/A
Predictive analytics	Extracting information from data and using it to predict trends and behavior patterns	CMT, Predilytics
Decision support	A computerized information system used to support decision-making of BH interventions/treatment	Cogito, Ginger.io, THRIVE

* Technology Segmentation adapted from California Healthcare Foundation (source)

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The Importance of a Tech Strategy

- Employers are desirous of new technology solutions but lack a focus of what they want to achieve
- A narrow and specific focus helps reduce the noise of a crowded tech market
- A strategy forces realistic expectations and sets objectives for deployment

Components of a Tech Strategy

- STEP ONE: Deliberate Partner Selection
 - *How to properly engage the right solutions and to identify and vet vendor partners rigorously.*
- STEP TWO: Communicate the Strategy
 - *How to inform clients of what to expect from you and what your technology roadmap consists of as well as how to communicate results openly as one progresses.*
- STEP THREE: Focus on Pilots to Test Partners and Prepare for Scaled Roll-Outs
 - *Participants should never feel a disruption in service, so one must thoughtfully and pragmatically pilot any technology innovations to determine the right technology solution for the right objective.*

Five key questions at the core of Beacon's strategy to drive the health system forward

- How to **increase compliance and participation** in care?
- How to **intervene intelligently in advance** of a crisis?
- How to **measure and reward** high-quality, cost-effective care?
- How to **engage communities of support** that promote a member's recovery and **maintain stability** in the community?
- How to **integrate BH care into PCP** settings?



We believe that technology can address some, but not all of these areas

CGP: App Selection Actions

- Verify the basis for claims made
- Verify data collection methods
- Verify engagement or retention rates
- Verify if behavior change techniques are incorporated into app
- Verify whether the app verifies motivation to change
- Consider a blended approach with counselor

We've vetted and determined focal areas for our technology strategy

Our strategy is born by **finding the overlap** between *where technology can have an impact* and the *key health questions* we are working to impact

Impact of technology on Beacon focus area	Member reported outcomes	Intervene before crisis	Support high-quality, cost-effective care	Extend treatment into community	Integrate BH into PCP
Computer-based CBT			1 Enable members to access high-quality therapy from the comfort and privacy of their preferred setting (i.e. home)		
Online counseling (chat, email)					
Online social network					
2 Mobile platforms for self-tracking and support	Engage members in managing and tracking their behavioral healthcare and communicating care needs through the use of mobile applications, including text messaging services				
Gaming					
Virtual reality					
3 Predictive analytics	Leverage data to develop insights and predict possible implications with our members' health, especially those who are co-morbid				
Decision support					


We're focusing on three high-impact areas to align with our strategy

- 1 Computer-based CBT and online counseling to **extend treatment** and help **impact cost-effective care**
 - Mobile CBT applications that can be directed by a clinician or a member
- 2 Communication platform to **enable member participation in care**
 - Technology to send/receive member texts
 - Appointment reminders and follow-ups
- 3 Measure **member-reported outcomes** and use **claims and other data to know where and when to intervene**
 - Technology platforms to survey members, collect responses and feed info back to providers for improved care outcomes
 - Analytic engines that use evidence and algorithms to flag where intervention is needed

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Screening Process



TECHNOLOGY PARTNER EVALUATION

Vendor	Program Name	Technology Description & Features	Cost Structure	Strategic Objectives Rating (1=0, 1=Low Impact/5=High Impact)					Populations Served (1=0-3 points each, 5=All for population, 1= technology designed with population in mind)					Total Score (1-40)	Notes	
				Engagement Rates	Treatment Adherence	Clinical Improvement	Outcomes Data Analytics	Pricing Model Value	Usability	Medicaid	Medicare	Health Plan	Employer/ Govt			

- Engagement rates** – % of target population actually using technology, including initial use and sustained involvement with technology. (1= low engagement/ 5 = high engagement)
- Treatment Adherence** – impact on supporting continuation of best practice prescribed treatments (1= minimum relationship to adherence/ 5 = maximum relationship to adherence)
- Clinical Improvement** – Method of measuring /reporting clinical impact included as part of technology, for example pre/post assessments (1=measurements absent/ 5 = measurements well integrated)
- Outcomes/Data Analytics** – Discipline included within product to measure and report outcomes, published outcomes, ROI described (1= minimum outcome reporting/ 5 = maximum outcome reporting)
- Pricing Model** – cost per user in comparison to similar products/alternative technologies (1= low value/ 5 = high value)
- Usability** – BH/O staff testers impression of technology from a user point of view, easy to understand, engage, utilize, build social support (1= low impact/ 5 = high impact)

The Limitations of Technology

- It is not a panacea
- Promotion leading to employee engagement with technology solutions is hard
- Question technology vendor claims of positive clinical outcomes – look at the research closely
- Technology solutions are often not priced in a manner realistic to what the EAP market will bear