

Total Person Health:

Benefits Shown through Research and
Employer Case Study Align

March 2020

Today's Agenda

- Welcome & Introductions
- Employer Case Study: Disney
- Researcher Case Study: UPMC & PCORI
- Peer to Peer Patient Advocates
- Q&A and Wrap up
- Reminder: Evaluation Survey

Welcome and Introductions



Karen Van Caulil, PhD

MODERATOR

President & CEO

Florida Alliance for Healthcare Value



Greg Martin

Deputy, Chief Engagement and Dissemination Officer

Acting Director, Engagement Awards

PCORI

Why “Total Person Health?”

Our wellbeing impacts our health and vice versa

- Physical and mental health are interrelated elements and not distinct ones
- Population health efforts are looking “upstream” into our communities to impact the social determinants of health
 - Health disparities
 - These same factors manifest themselves in the workforce and workplace
- Emerging evidence that both “chronic stress” and “loneliness and isolation” are risk factors
- As significant an impact on our health as tobacco usage

Speakers



William J. Dinger, Jr.
Healthcare Innovation & Labor Support in
the Enterprise Benefits Department
The Walt Disney Company



Eva Szigethy, MD, PhD
Professor of Psychiatry, Medicine
and Pediatrics
Behavioral Director, UPMC
Chief Medical and Scientific Office
Senior Faculty, UPMC Center for
High-Value Health Care,
UPMC Health Insurance Division



Randi Sigal
Co-Founder & Co-Director
IBD Connect



Pam Wein-Levy, BSN, RN
Co-Founder & Co-Director
IBD Connect

Employer Case Study: Disney

William J. Dinger, Jr.

Healthcare Innovation & Labor Support in the Enterprise Benefits Department

The Walt Disney Company



Life | My Benefits

March 19, 2020

Disney at a Glance

The Walt Disney Company is a multinational media & entertainment company organized along three principal themes and four business segments:



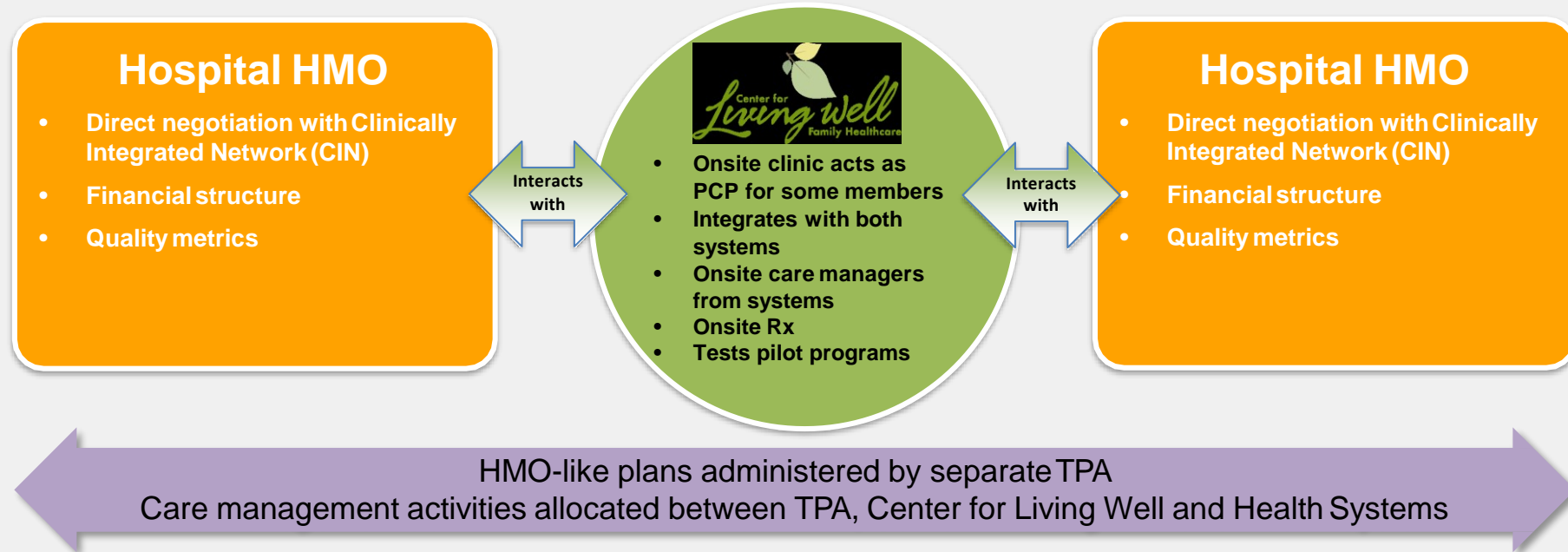
© Disney

Over 200,000 Cast Members and Employees in 40+ countries

HMO-like plans (lower out-of-pocket, higher premium contributions, optimized direct contracted networks)

Offered as Benefit Options alongside

Consumer Choice option (higher out-of-pocket, lower premium contributions, broad carrier network)



Platform for driving value through integration of services and oversight for population health

Operations Summary

- Multiple organizations integrated into one seamless resource for eligible Cast Members and their enrolled family members
 - TPA resources to answer questions
 - Labs
 - **Behavioral Health**
 - Hospital case managers
- 15,000 ft² facility
- 22k+ unique users
- 49k+ visits
- Largest pharmacy in the Southeast



The Need for EAP & Behavioral Health Services

Wellbeing impacts everyone's ability to be at their best. Both health and financial worries can be a struggle for all of us. We need to support our Cast Members as well as their families to help them meet life's challenges.

- We are moving to a Total Wellbeing model to help us meet our Cast Members where they are
 - How do they want to interact?
 - Where do they want to receive services?
 - What motivates them to take action?
 - The more we integrate our services with our partners and close gaps in care we are finding that the need for EAP / Behavioral Health services is growing
 - Access was an issue so we partnered with a local provider
 - On Property Resources
 - Co-located within our onsite health facility
 - At various worksites throughout our locations
 - International housing
 - College housing
 - Access in the community within 48 hours
-

The Need for EAP & Behavioral Health Services

- Languages barriers existed as well
 - EAP / Behavioral Health resources who speak multiple languages
 - Spanish, Haitian – Creole, Vietnamese
 - **Integration into the care model at our onsite clinic**
 - There is a mental health professional on site at all times
 - They do not have any appointments or see patients regularly
 - Their sole focus is to provide support to our medical professional
 - If a possible mental health issue is identified during an office visit they are brought into the exam room right away
 - Can act as a support model for our physicians as they work through complex cases
 - Our hospital partners are now implementing this service at their larger practices
 - We have started to see success with chronic condition improvement due to this model
-

Researcher Case Study: UPMC

Eva Szigethy, MD, PhD

Professor of Psychiatry, Medicine and Pediatrics

Behavioral Director, UPMC Chief Medical and Scientific Office



Treating the Whole Person: Multidisciplinary Care in IBD

Eva Szigethy MD PhD

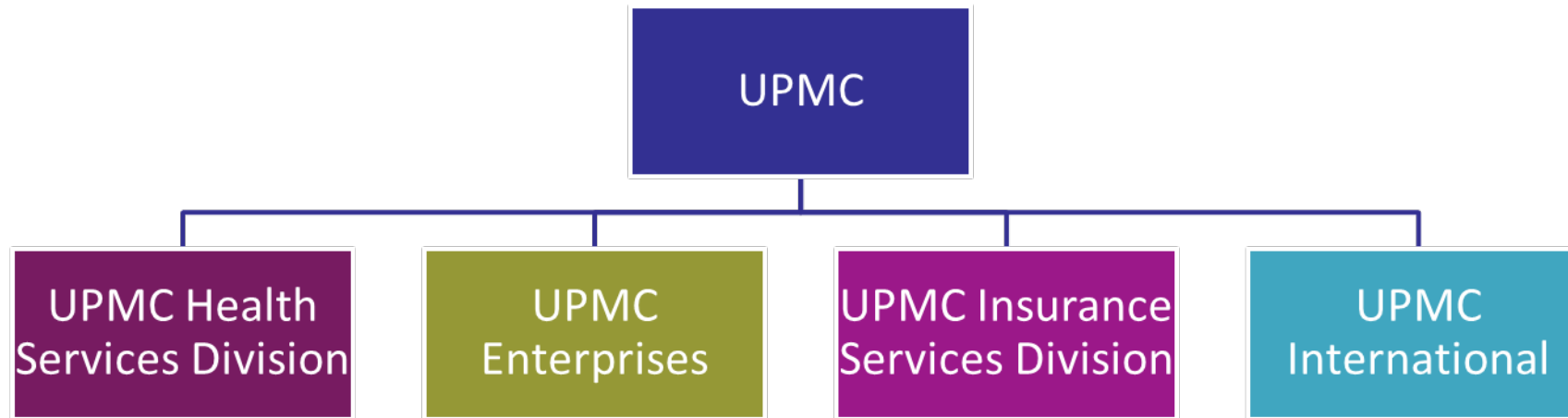
Professor of Psychiatry, Medicine and Pediatrics

Medical Director, IBD Total Care Program

Director of Behavioral Health, UPMC Chief Medical and Scientific Office

Senior Faculty, UPMC Center for High-Value Health Care, UPMC Health Insurance Division

UPMC Payer-Provider Partnership



More than **125 regional hospitals/other facilities** and over **11,500 physicians**

Rapidly growing insurance products more than **3.4 M members** and **11,400 employer groups**

2nd largest provider-owned health plan in the country

Largest medical health insurer in Western PA with **40% market share** across all covered lives

Largest Medicaid behavioral health MCO in PA

Partnership with UPMC IBD Medical Home that supports innovative services for health plan members

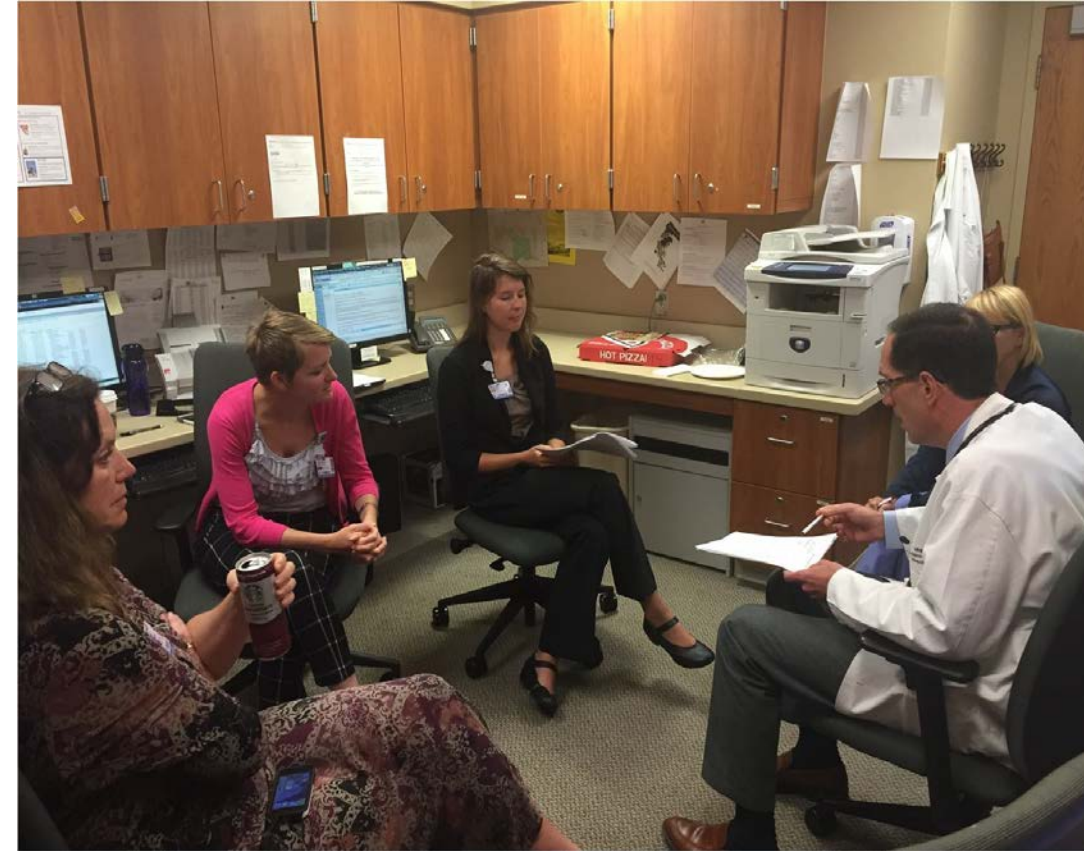
Inflammatory Bowel Disease (IBD) shares many characteristics with other chronic diseases

- Life-long gastrointestinal symptoms often hidden from others
- Inflammatory bowel disease (IBD) ranks as top three expensive chronic medical diseases in most tertiary medical centers.
- Anxiety, depression, and pain are common.
- IBD health care costs double in the presence of behavioral disorders.

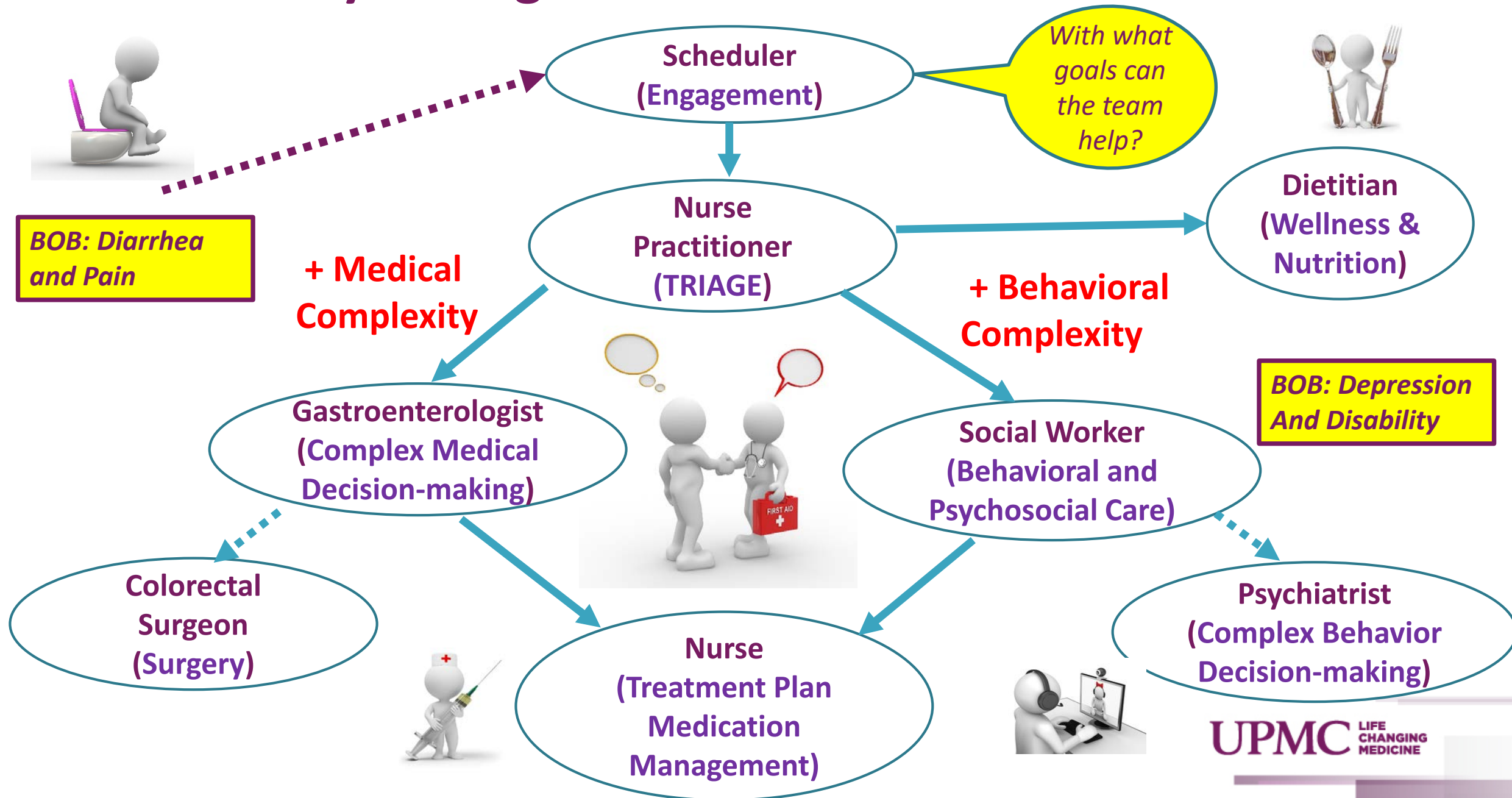


Treating the Whole Person with Inflammatory Bowel Disease: The IBD Patient Centered Medical Home (PCMH)

- Coordinated medical-behavioral-wellness care
- Team-based care that is compassionate and culturally sensitive.
- Partnership with UPMC Health Plan: IDFS model in action.
- 890 unique IBD patients seen in the program since 2015 with about 500 active patients per year.

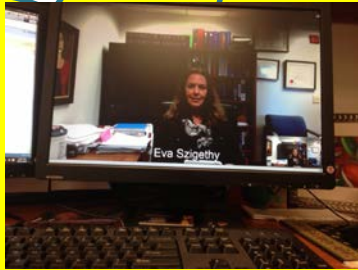


Patient Journey through IBD Total Care PCMH Clinic

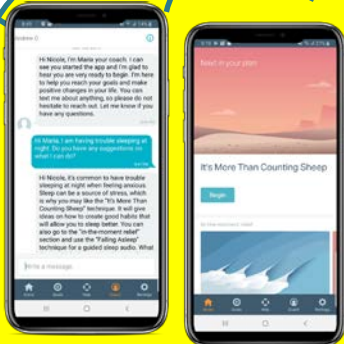


Optimizing Integrated Care with Health Technology: IBD

Total Care PCMH



Total team visit via
telemedicine

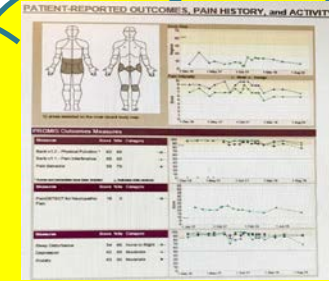


Coaching-enhanced
digital tools

Patient-centered



PCMH Team



Remote monitoring of
patient-reported outcomes

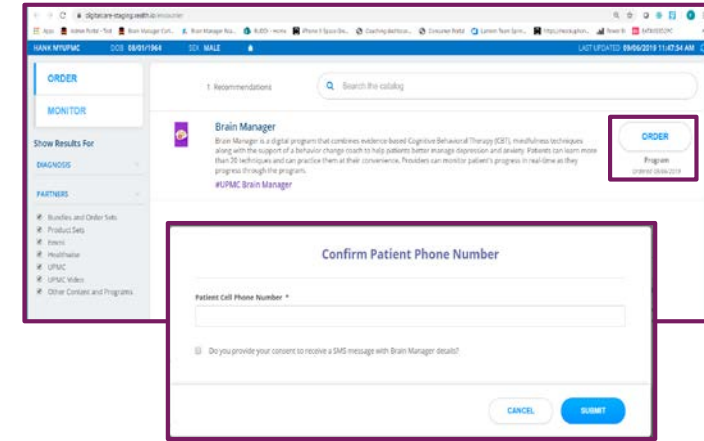


Clinical analytics using EHR

Integration of Digital Behavioral Program into IBD PCMH



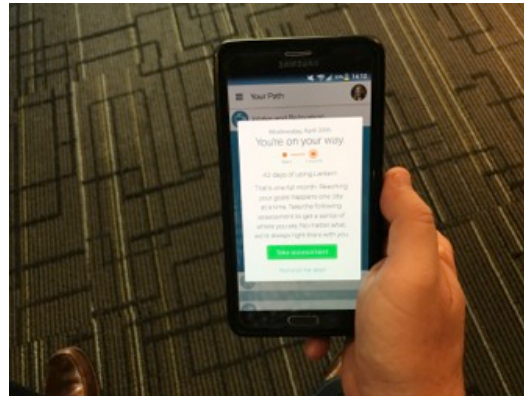
Patient is screened at visit for depression and anxiety in clinic waiting room



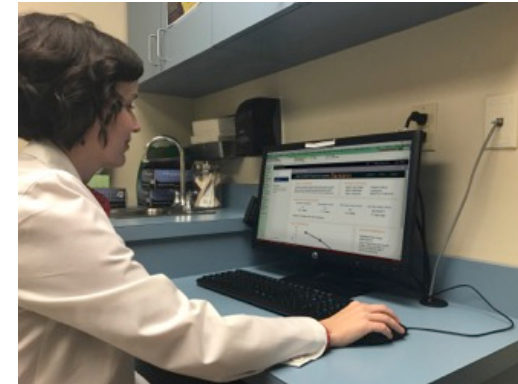
Clinical team orders digital CBT program directly in electronic health record (EHR)



Patient leaves visit having downloaded the program



Patient uses the program and takes ongoing assessments



Team is kept updated of progress in EHR

The Art and Science of Treating the “Whole Person”: The Art

- **Care Coordination**

Providing a supportive wrap-around of clinical & behavioral services helps patients reach their therapeutic goals.

- **Total Team Education**

What can providers do or say to help patients feel heard and to connect with their internal resources to manage and transcend challenges.

- **Peer Caregiver Support** (IBD CONNECT are UPMC peer volunteers with personal experience in IBD who support and educate hospitalized IBD patients and their families and keep them connected to PCMH).

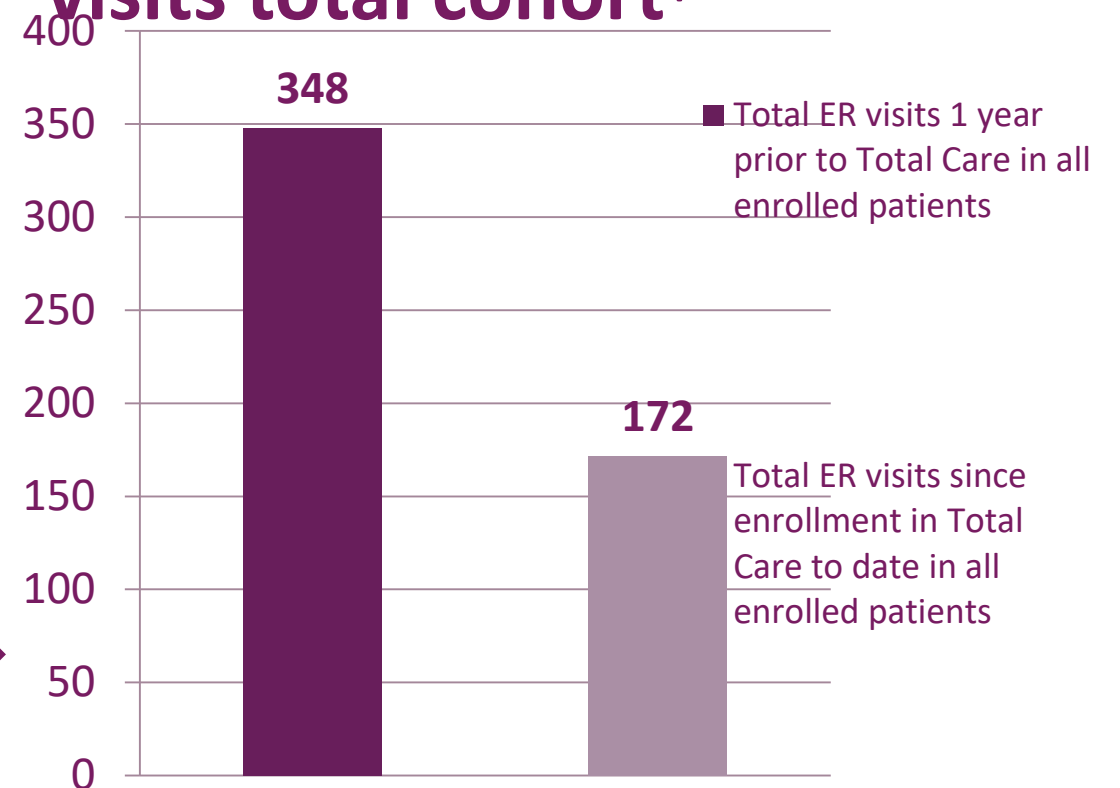
Helping patients with support, education and connectivity to their care team to improve their “lived experience”.

IBD PCMH: 2 Year Outcomes

- High patient engagement
- High patient satisfaction
- Reduced provider team burnout
- Improved clinical outcomes
- Reduced opioid use
- High engagement in health technology
- **Reduced unplanned medical utilization**

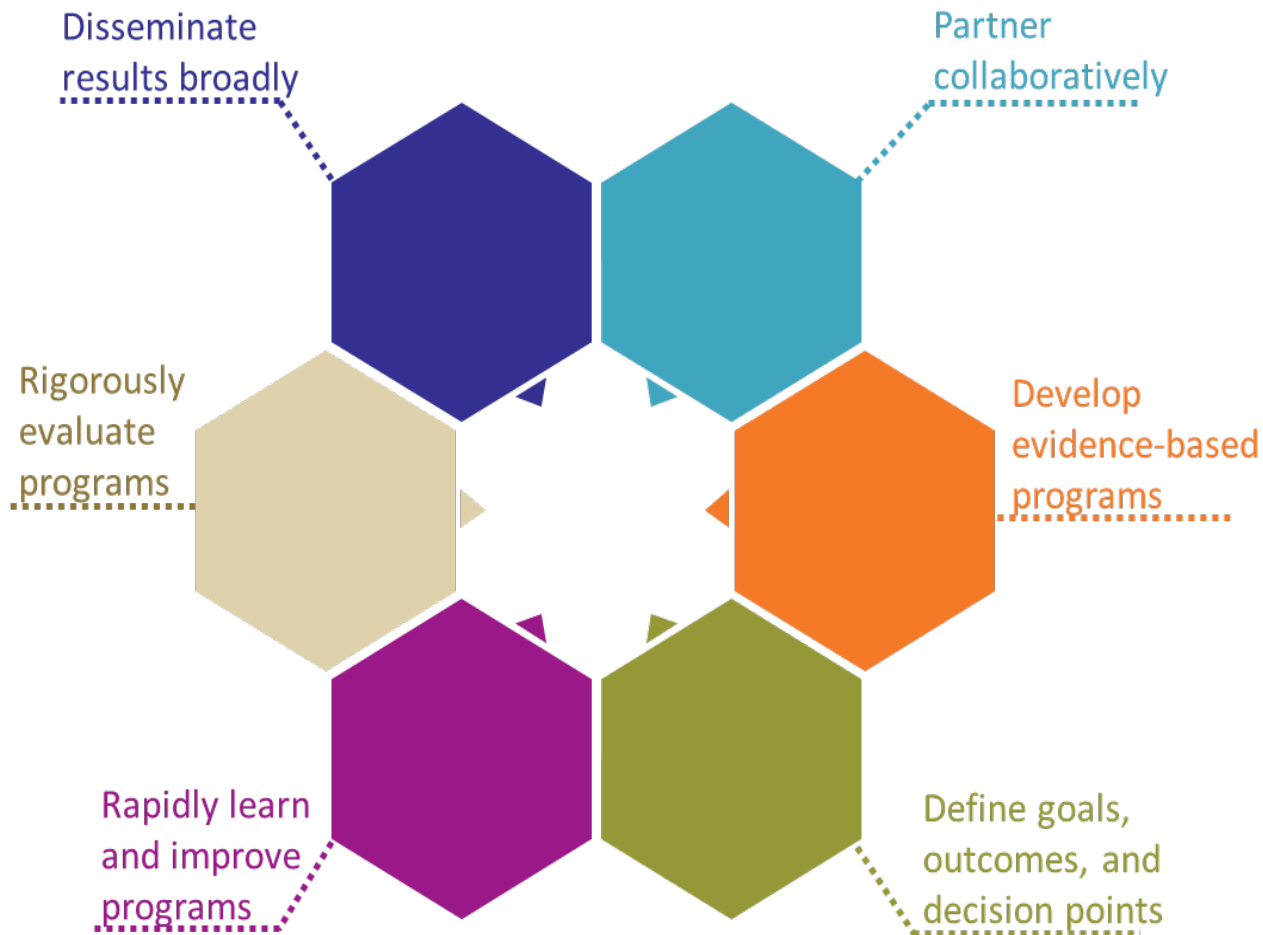


50.5 % decrease in ER visits total cohort*



*Based on clinical team analysis of EHR data.
Regueiro et al., 2017, 2018; Szigethy DDW, 2017; 2018
Goldblum 2019

Research Partnership: UPMC Center for High-Value Health Care



Established in **2011** as a **nonprofit research organization**, owned by UPMC, housed within the UPMC Insurance Services Division

Goals:

- **Enhance visibility and promote innovation** through stakeholder-driven research partnership
- **Support innovation, learning and dissemination** through real-world scientific inquiry
- **Broadly disseminate findings** to ensure stakeholders have access to meaningful and actionable information to improve health care experiences and outcomes

External funding:

- Over 37 million in funded studies
- Seven PCORI contracts since 2012

PCORI Study of IBD PCMH: Overview

Funding

UPMC Center for High-Value Health Care prime recipient of \$6.6 million in

Patient-Centered Outcomes Research Institute (PCORI) funds

Study Duration:

4.5 years (February 1, 2019 - July 31, 2023)

Multi-Site

UPMC, Cleveland Clinic, Mount Sinai Hospital

Design

Individual randomized controlled trial; mixed-methods approach

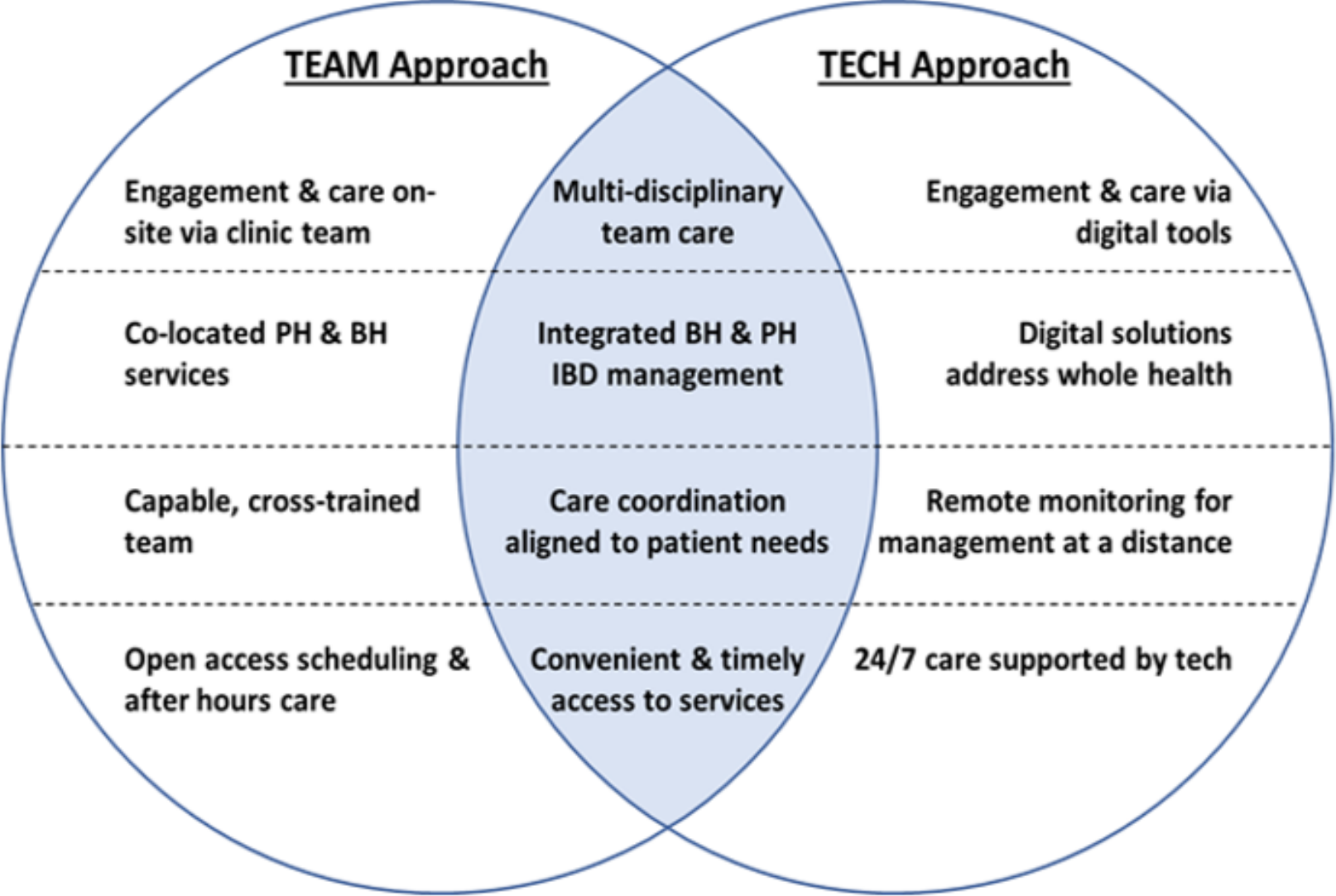
Care Approaches

TEAM

TECH



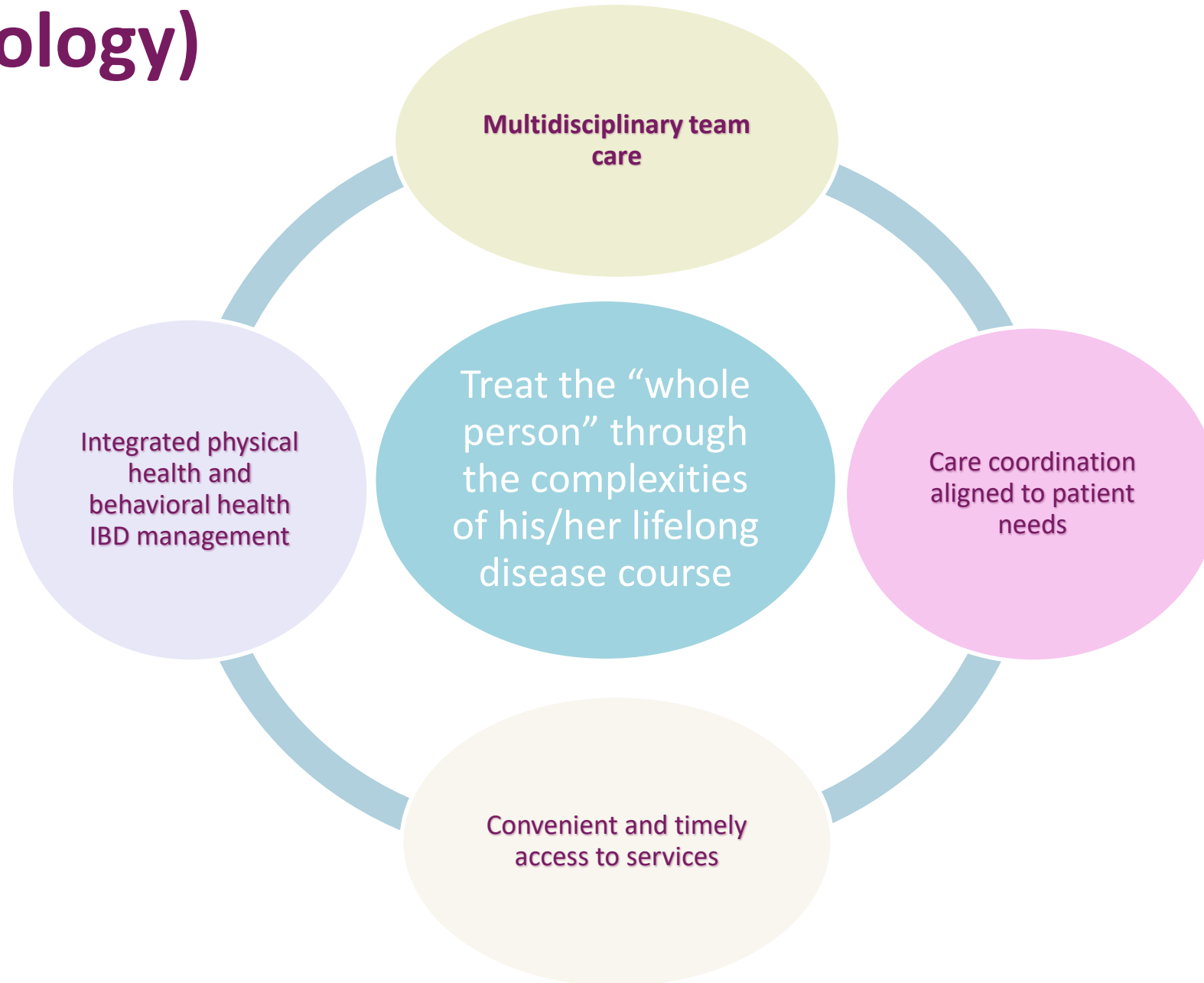
PCORI Study of IBD PCMH: Care Approaches



PCORI Study of IBD PCMH: Study Goals

1. To **compare the impact of two specialty medical home approaches** (TEAM and TECH) on patient outcomes, including IBD and behavioral health symptom severity, functional impairment, health care use, quality of life, and self efficacy
2. To **determine which strategies work best for patient subgroups** based on age, behavioral health symptoms severity, and IBD disease activity
3. To **understand what processes and procedures help with implementation**, what challenges exist, and the potential to scale the specialty medical home model to support patients with other chronic conditions

Summary: UPMC PCMH (team care + health technology)



The Value of Volunteer Peer Specialist Support Networks: IBD Connect

Randi Sigal

Pam Wein-Levy, BSN, RN

Co-founders & Co-directors of IBD Connect

A SOLUTION: IBD CONNECT

UPMC LIFE CHANGING MEDICINE



IBD Connect

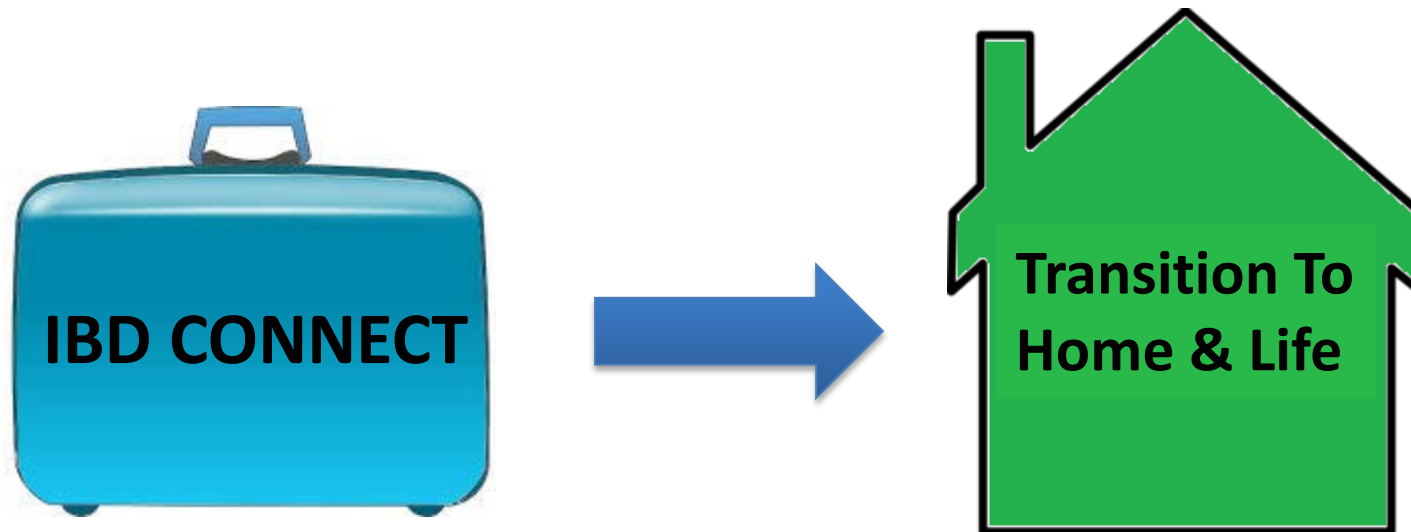
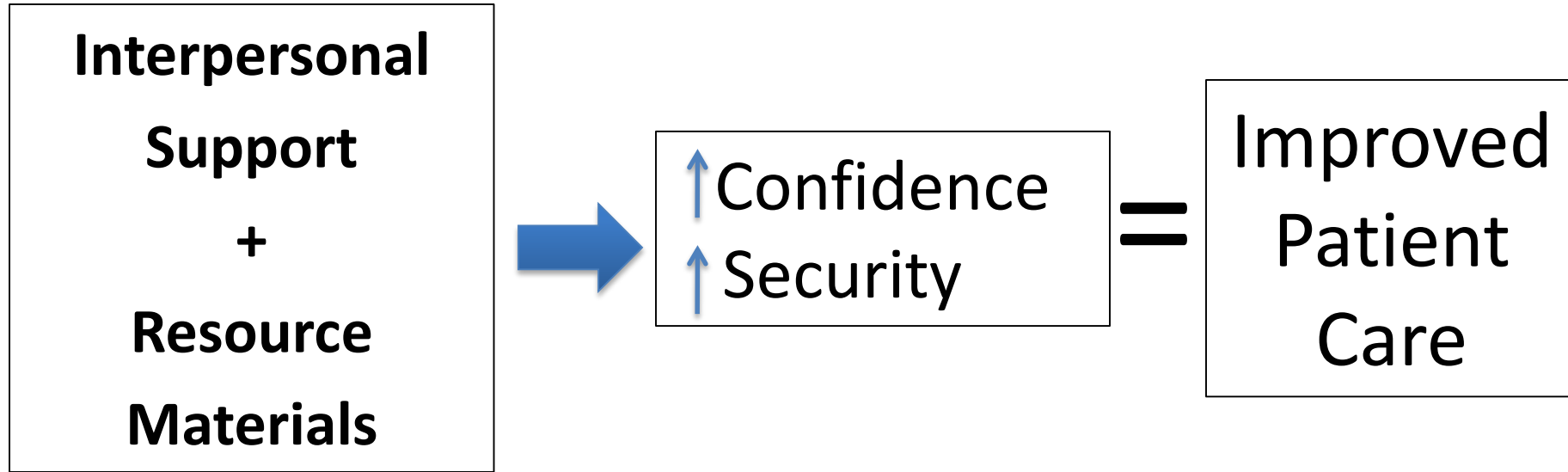
Patients with Inflammatory Bowel Disease (IBD), their families and caregivers face stressful challenges. Many people find comfort when they are able to connect with others who have shared similar experiences. IBD Connect was created for this purpose. Our network of volunteers offers support and encouragement from those who have also encountered the struggles involved with the diagnosis and treatment of IBD. IBD Connect provides educational and resource materials while linking patients and families to services available inside and outside of the hospital setting. This person-to-person interaction diminishes fear, provides helpful information, and restores hope while demonstrating the ability to live a fulfilling life.

IBD Connect volunteers are available to make hospital visits or speak with you over the phone. Contact an IBD Connect volunteer today by calling **412-864-1784** or by emailing **IBD.Connect@gmail.com**.

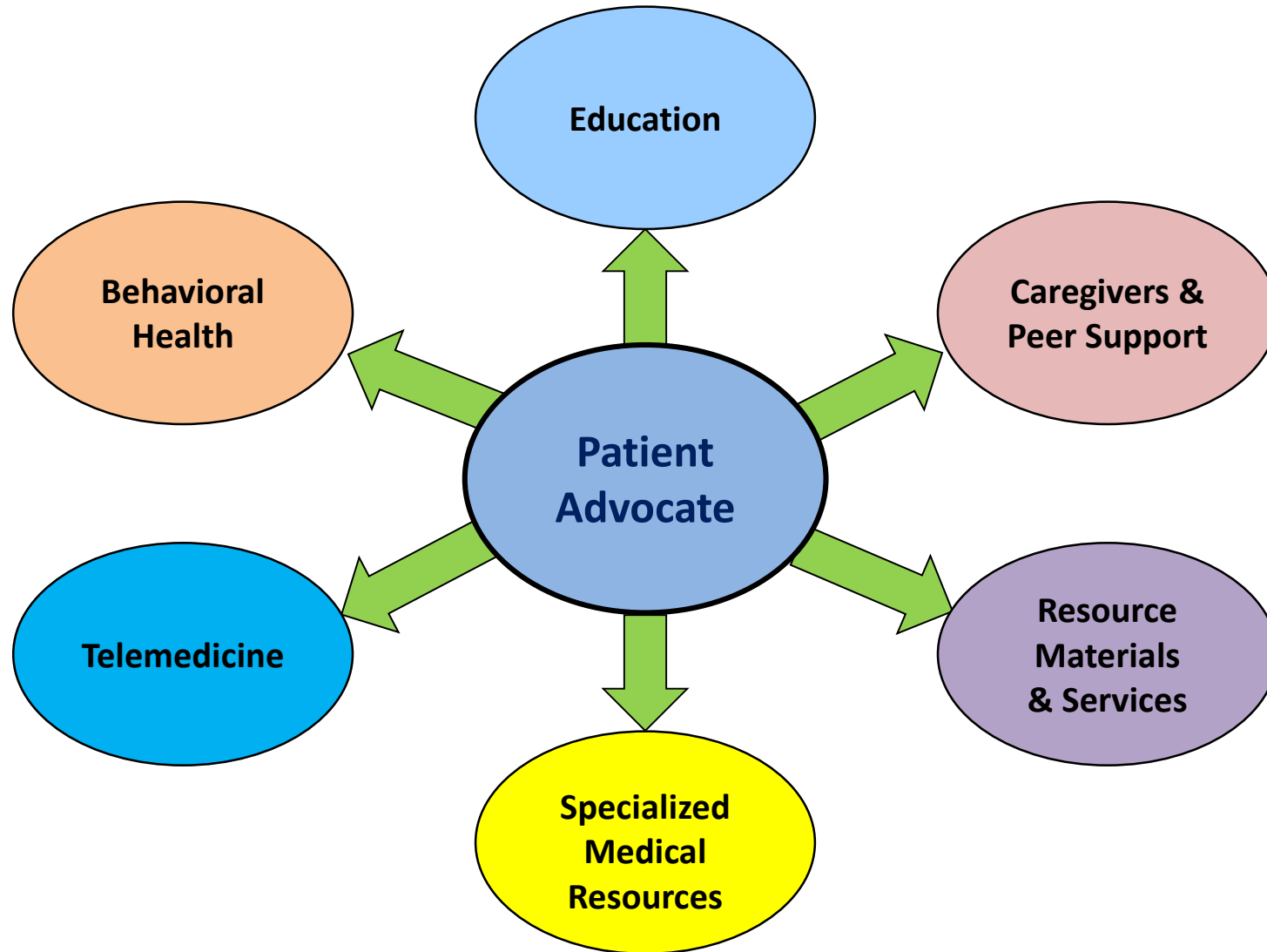
A volunteer peer specialist support network for patients & families with Inflammatory Bowel Disease

- Offers support
- Provides educational and resource materials
- Tracks quality assurance impact
- Restores hope

CONFIDENCE & SECURITY



CONDUIT TO SERVICES

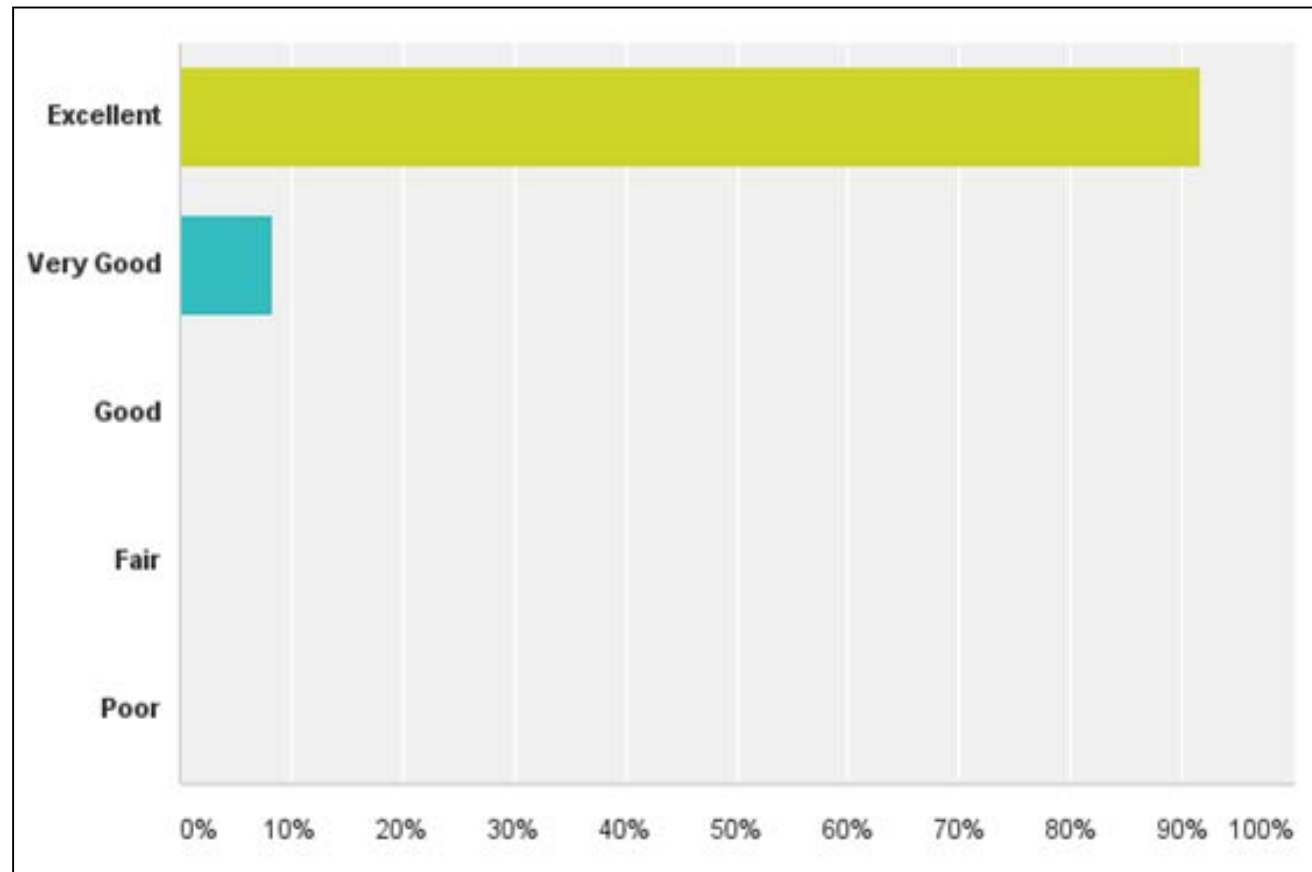


IDENTIFY PATIENT CONCERNS

- Diet and Nutrition
- Medication
- Pain Management
- Sleep Disturbance
- Narcotic Use/Addiction
- Stress Management
- Financial Burden
- Job Security
- Social Isolation
- Intimacy & Fertility

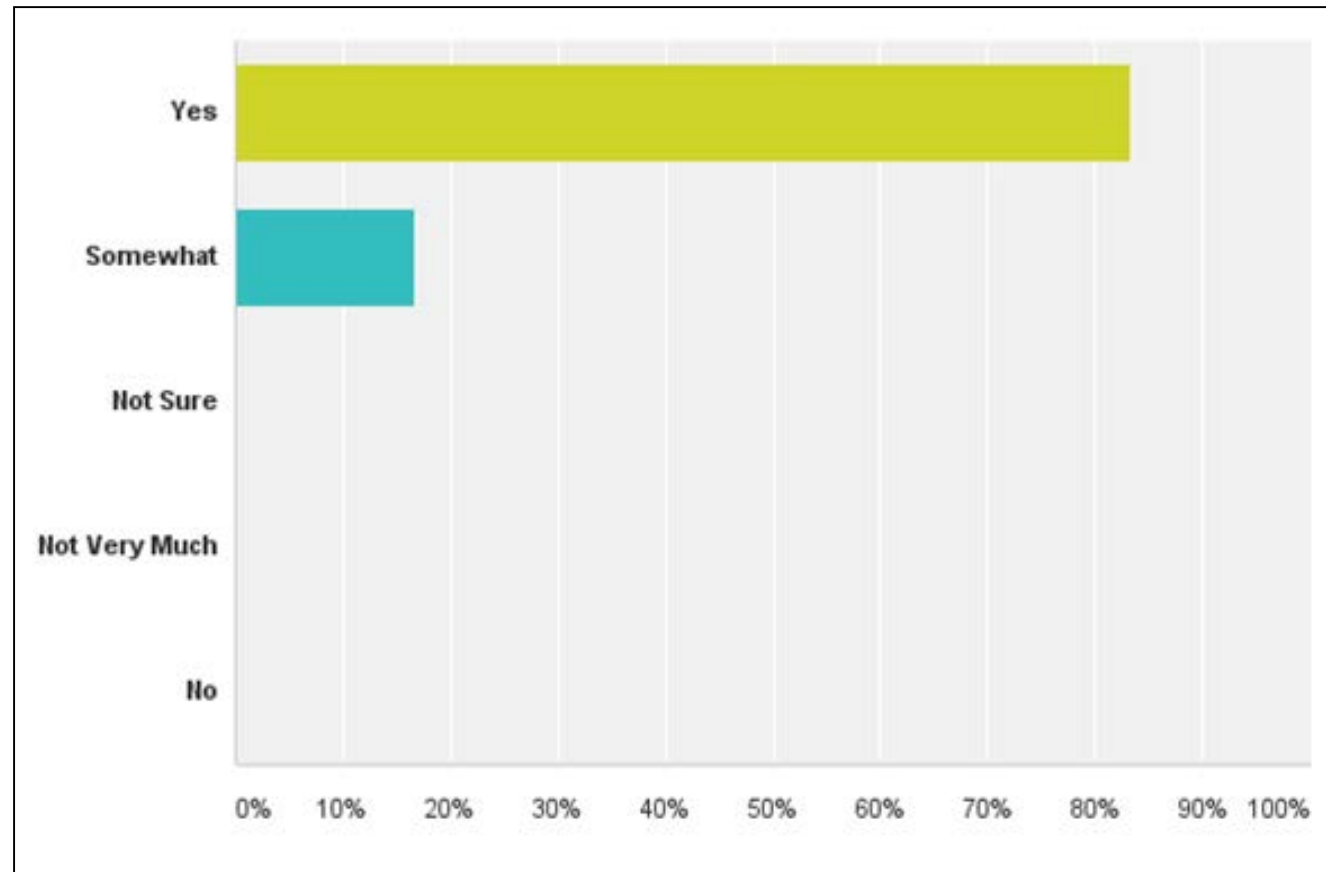
SATISFACTION SURVEY RESULTS

Overall IBD Connect Experience

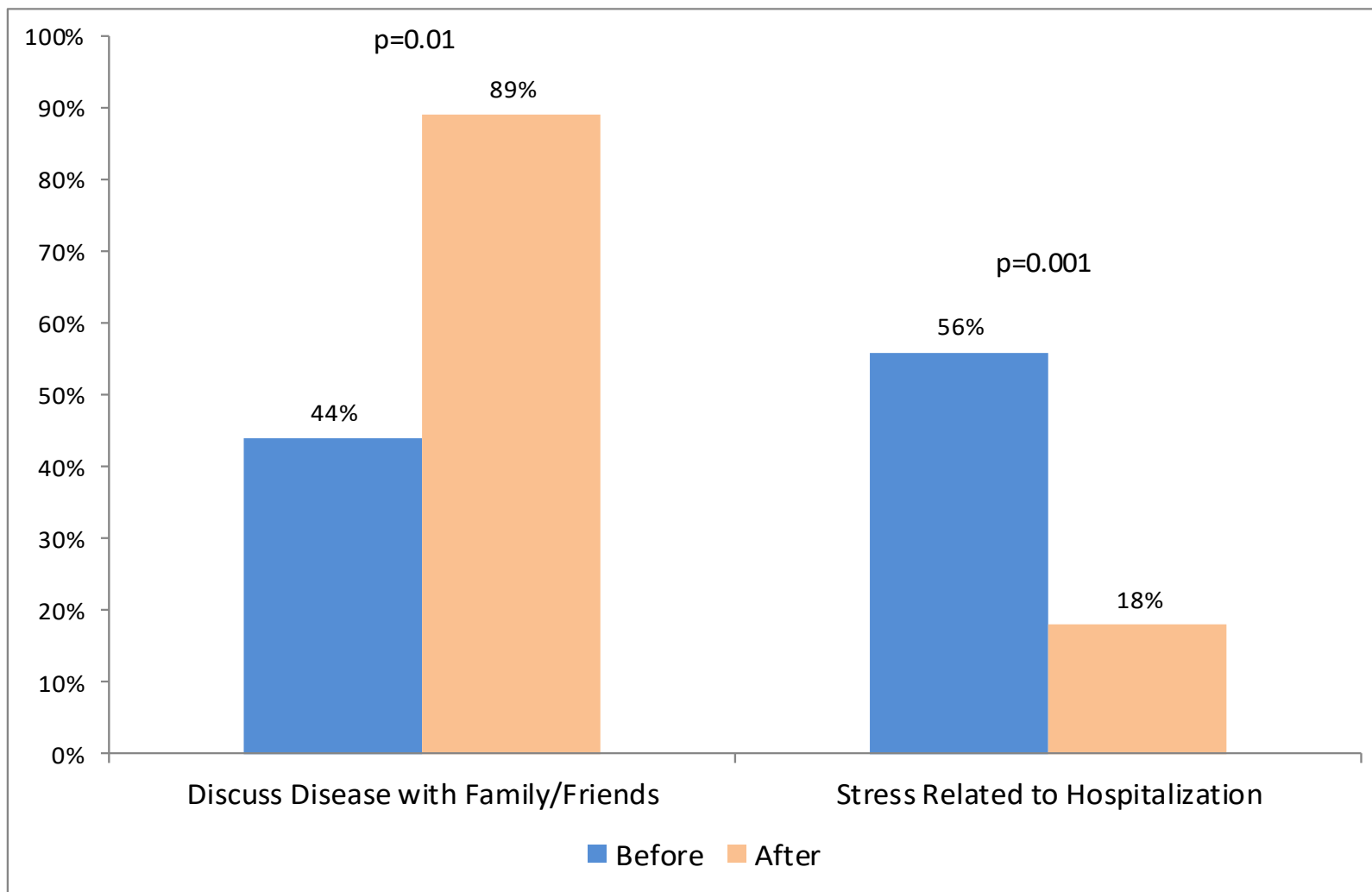


SATISFACTION SURVEY RESULTS

Did Your Outlook Improve after IBD Connect Visit?



IMPACT OF IBD CONNECT



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Your opinion matters to us! Please take a few minutes to complete the survey that will pop-up after the webinar ends. You can also access the survey in the follow up email that you receive from our webinar platform.

Thank you for your participation!