Healthcare solutions with shared accountability

Many corporations, as well as governments, are facing increasing healthcare costs and rising levels of chronic disease. Sandip Patel, head of international business at Aetna, explains how good leadership, strong employee engagement and careful customisation can produce effective, affordable programmes.

With western companies eying emerging markets for the next wave of growth, many will immediately look to implement effective healthcare and wellness coverage for the welfare and productivity of their expanding employee bases. The benefits of such programmes have not gone unnoticed by the public sector either, with governments starting to recognise the economic and social benefits that a healthier population can bring; however, this course of action, although increasingly popular, is becoming exceedingly difficult to execute.

Rapid urbanisation in developing markets has led to an increase in instances of chronic diseases associated with a more sedentary lifestyle, while diabetes and hypertension continue to pose problems in the West and increasingly across the globe. At the same time, there is an almost universal widening in the gap between necessary healthcare expenditure and what governments and corporations can actually afford, exacerbated by tough economic conditions.

“Health reform is becoming the norm, even in emerging markets,” says Sandip Patel, head of international business at insurer Aetna. “There is real value in managing the health of employee populations from both a government and corporate standpoint. But everybody has to try and balance the social and economic agendas. This is where there has to be shared accountability across citizens, employees, corporates, medical providers and the government.”

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Optimised healthcare spend

Although there is no silver bullet, programmes implemented over the past few years have proved highly effective in improving healthcare provision while reducing costs. Central to these efforts has been a customised approach that targets specific conditions and demographic groups, helping to drive efficiencies and quality in the healthcare system.

“Most programmes that have proved to be successful are geared towards the conditions that are prevalent in a given population and driven through strong individual engagement,” Patel explains. “These individuals take more accountability for staying healthy, while wellness programmes can help improve the overall condition of the population.”

Aetna’s ability to do this stems largely from its considerable investment in healthcare information technology. Its CareEngine system continuously scans an individual’s health and claims information, and matches it against medical evidence. Based on this information, patient-specific alerts are generated for the patient and the provider, alerting them to potential gaps in treatment. The system identified more than 1.8 million such gaps in 2008, in many cases coming up with more effective treatment options to help improve outcomes.

One programme that leverages similar technology has been implemented in some UK primary care trusts and has seen particularly impressive results. Aetna identified individuals with a high risk of certain chronic diseases and then engaged directly with these people in an effort to drive them towards the relevant wellness and prevention programmes.

“This programme has been in place for over three years,” says Patel. “Over the last year or so we’ve seen meaningful reportable results that have shown a 50% reduction in urgent care admissions among the high-risk pool. This is a key example of how you can drive preventative care management programmes that help individuals stay healthy and avoid major health conditions. We commissioned an external survey to measure the effectiveness of a prevention and wellness programme, which revealed a satisfaction rate of 93-94% among those involved in the programme.”

Targeted health and wellness programmes

A 2010 study conducted in the US compared one sample of participants from an Aetna Health Connections disease management programme with a group of non-members who displayed similar health conditions. The results showed that the first group proved more adept at disease management, keeping up with courses of medication and making sure things such as blood pressure and cholesterol were kept in check. This group saw 19.5% fewer hospital admissions for diabetes, coronary artery disease, congestive heart failure and strokes, and spent on average 9.5% less on their medical costs. It’s not
surprising that many governments are starting to place such programmes at the core of their healthcare offerings.

“The Australian Government has been doing this for a long time, with their mainly state-owned insurers placing wellness and prevention programmes into the fabric of their service,” says Patel. “In China, we’ve been offering these types of programmes to employees from multinationals that we are expanding operations in the country. Now, the Ministry of Health and provincial governments are showing interest as well.”

At one multinational employer in China, Aetna partnered with the company to institute carefully targeted wellness programmes that offered consultations with medical professionals over the phone or online. The results were particularly impressive.

“As companies drive growth, they are concerned about employee welfare and the impact poor health could have on productivity,” Patel explains. “Cynics sometimes say, ‘this is all well and good, but do the employees like it or use it? Might they find it intrusive?’ We see that wellness schemes are moving to attract and retain employees. In China, the employees are not only engaged, their levels of engagement are much higher than we find in developed economies such as the UK. In some cases, Chinese workers have petitioned their companies to open up the programme for dependents and they have shown a willingness to pay for this out of their own pockets.”

The key to a successful healthcare programme is, in Patel’s view, making it as relevant as possible to the government or corporation in question, and having the ability and flexibility to adapt to changing requirements. It is also about garnering a strong level of individual engagement, which is a difficult job, but one that underpins all of Aetna’s programmes.

“Global leadership in healthcare will be shaped by driving shared accountability and focusing solutions in a way that empowers people to take care of their own health,” he explains. “When we look at health, wellness and prevention we have a formula for the implementation of a successful programme: leadership at a government/corporate level combined with engaged employees or citizens; and customised solutions.

**Successful health and wellness programmes**

“You can have a wellness clinic in your corporate headquarters, but if 85% of your employee base is frequently travelling, that solution is not going to be suitable. We believe in shifting centres of gravity to local markets by leveraging our global assets and capabilities to implement local programmes that are relevant for each market.”

In pursuing international growth, one of Aetna’s priorities is to follow its customers as they become more global. It will look to build on its already strong presence in China, the Middle East and Western Europe and extend its network of primary care and outpatient providers. However, in terms of the service the company provides, Patel sees a sharp focus as one its major strengths.

**Higher productivity**

With the movement to emerging markets set to continue for many years to come and with cases of chronic disease growing in frequency, governments and corporations have no choice but to confront the problem. Results-driven customised healthcare and wellness programmes ultimately produce healthier employees and citizens, lower medical costs and higher productivity – to everyone’s benefit.

**Further information**

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