

# DISEASE MANAGEMENT

## Successful e-DM initiatives rely on the connectivity of patient, provider, insurer

Plans embrace programs that engage the provider and make patients responsible for their own care

BY TRACEY WALKER



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**A**S DISEASE MANAGEMENT programs continue to evolve, expand, and grow in popularity, technology is revolutionizing the way they are delivered. Web-based DM, or e-DM, is the natural evolution of a new platform to increase the efficiency and effectiveness of traditional DM programs.

"Web-based disease management supports and improves the individual's self-management skills and provides evidence-based treatment, timely information and education to both individuals and their healthcare provider," says Stephanie Pronk, Watson Wyatt Worldwide senior consultant. "A Web-based approach links and integrates all elements of health and care that produce a positive outcome for the individual."

With that said, an effective, coordinated system that links patients, providers and risk holders and decreases

the overall costs of care has long been a focus for health plans and vendors, says John Haughton, MD, MS, senior vice president and chief medical officer at DxCG Inc. "Web-based DM globally is a system that uses technology to enhance an existing, but often fragmented, care process between its three constituent stakeholders—patients, providers and risk holders (typically insurers, state and federal governments, and/or employers)," Haughton says.

Some features of e-DM as they relate to the individual groups are being embraced by health plans and vendors in their DM programs:

■ **Patient.** "Web-based systems that include health diaries and medication tracking are useful for improving compliance with evidence-based best practices," Haughton says.

"Web-based DM will help motivate patients to comply and assist in their own care," says Peter J. Plantes, MD, vice president, physician services at VHA Inc., a nationwide network of community-owned healthcare systems and their physicians. "With the coaching of the care manager, the patient can be directed to specific interactive tools such as weight trackers, glucose tracking, exercise programs and online smoking cessation."

Shera Gruen, of Braun Consulting Inc., shares a similar viewpoint. "Systems that collect vital signs and monitor compliance with treatment protocol increase the patient's responsibility for his or her own care," Gruen says.

■ **Provider.** Web-based DM offers providers an opportunity to receive updates on patient status and compliance in a time-efficient manner.

■ **Insurer.** "One of the biggest wins for Web-based DM is through the risk holder, typically the insurer," Haughton says.

Tracey Walker is senior editor for MANAGED HEALTHCARE EXECUTIVE.

“The ability to create shared health records and link all parties together in a secure fashion so they benefit from the information that the patient is self-reporting creates real value in disease management,” says Rose Higgins, senior vice president, products and marketing at iMetrikus Inc., Carlsbad, Calif. iMetrikus developed the technology for Home Diagnostics Inc.’s Prestige IQ blood glucose monitor.

iMetrikus’ MediCompass platform delivers information and data intake options and reports to providers and patients. “It also can bring in third parties, such as case managers, by monitoring or adding actual data to the system,” Higgins says.

#### EMPOWERING THE PATIENT

Working together with its DM vendors, Humana is providing Web-based DM services to members participating in its congestive heart failure, coronary artery disease and rare diseases programs. “Of the overall rare diseases program participation, about 45% of those members with Web access use the program’s Web site,” says Humana’s Jack Lord, chief clinical strategy and innovation officer. “More than 75% of those who use the site are satisfied with the Web-based experience.”

More than 500 of the Humana participants accessing the CorSolutions site use tracking logs to monitor their condition. Another feature of the Web-based program with the cardiac program vendor is the ability for the Humana personal nurse to track information about their members and communicate directly with the disease manager regarding any specific issue or concern related to their condition, says Joanna Apple, CorSolutions Medical Inc.’s vice president of marketing and product development. “More than 400 Humana personal nurses are electronically submitting new referrals and communicating with disease managers about their members’ care. This feature simplifies the communication process and facilitates the disease management process,” she says.

In addition, members might choose

when and how they interact with DM programs and other consumers who might be experiencing similar health concerns, Lord says. “Web communities allow for personal interaction between individuals with like health experiences, a highly ranked benefit among Web-based DM users,” he says.

The convenience and self-service offered by Web-based DM allows for more people to participate when they have time, Apple says. “Surveys, assessments and tracking logs, for example, can be completed 24 hours a day, seven days per week.”

Likewise, Accordant has made it easier for the patient to get into the key areas of its site, with availability 24/7, says Dick Hodach, MD, PhD, medical director, Internet services at Accordant. “The patient is sharing information that is either enacted upon with automated responses or is linked to a center where someone is responding to the information.” From its recently conducted patient survey, Accordant’s Web use is higher for information gathering, especially the Accordant Library, Hodach says.

The Healthwise site (www.healthwise.com) is another example of a program that uses clinical content in a usable fashion to the DM community.

“Web-based DM empowers the member, and if the provider participates, he/she can have access to more information on his or her patient, enabling them to provide better treatment,” says CEO Clelland Green, America’s Choice Healthplans, which offers its model of online benefits administration.

Access to information is also the goal of HealthShare Technology’s Select Quality Care e-tool that can be implemented within a DM or medical management

#### WINNING STRATEGIES



**JAMES M. JACOBSON**, a partner with the national health law group at Holland & Knight LLP’s Boston office, offers managed care executives these legal tips when implementing e-DM:

**DO NOT** cross the line into treatment, which could require state licensure of healthcare providers in all states where the consumers reside.

**DO NOT** heighten liability risks by creating a system for consumer reporting of morbidity that is not adequately tracked so that patients with deteriorating conditions are referred back to treating providers appropriately.

**DO** protect patient information privacy and security against uses and disclosures that could violate HIPAA or state laws.

**DO NOT** violate state managed care laws (e.g., by forcing patients into the e-DM program rather than making appropriate real-life referrals).

service, says Jenny McGee, senior VP, Select Quality Care, HealthShare. “Select Quality Care allows members and patients to compare hospitals and select the best one for their individual needs based upon crucial evidence-based measures such as patient volume, mortality rates and unfavorable outcomes,” she says.

Keeping patients out of the hospital was a goal at Health Management Partners. With the help of StatusOne Health Systems Inc., the St. Louis-based MCO was able to identify at-risk patients before they required costly hospitalizations. The plan achieved improvements in patients’ health, while simultaneously reducing its related costs over one-third.

“Population health management takes a patient focus, not a disease focus, by proactively identifying a subset of an overall membership and providing care management or interventions to that subset,” says Matt Kelliher, president at StatusOne Health Systems in Westboro, Mass.

## SECURITY ISSUES

Security, privacy are  
on e-DM front burner

BUILDING USER CONFIDENCE in security of information and promoting e-adoption must be at the forefront of successful Web-based DM strategies, according to Humana's Dr. Jack Lord, chief clinical strategy and innovation officer. "As confidence in Web security continues to be a major issue, Internet users often are reluctant to enter personal information and use health assessment tools," Lord says.

**Misinformation misfortune.** Another important element to Web-based DM is the availability of misinformation on the Internet, says CorSolutions' Joanna Apple, vice president of marketing and product development. "It is critically important to assure that the educational in-

formation and links are from reliable and trusted sources, that the information is kept accurate and current, and that the scope of data covers a wide array of topics from medication, diseases, symptoms and various procedures," Apple says.

Michael I. Ruxin, MD, chairman and CEO of Global Med Technologies, PeopleMed.com, agrees. "Managed care executives need to be clear that their DM protocols should provide medical best practices by recognized institutions," he says.

"If an MCO uses a DM company that has simply created internal protocols generated by a potpourri of physicians, nurses and other clinical personnel, it runs the legal and clinical risk of not providing state-of-the-art DM to its chronically ill patients," Ruxin says.

—Tracey Walker

ologist," says Bellin, who is also director of informatics, Emerging Health Information Technology. Insightful Corp. provides the organization with Web-based analytic technologies that have allowed it to develop this paradigm.

Web-based DM programs need to be tailored to the individual so that appropriate information, education and services can be "pushed" to participants, Pronk says. "This increases the value of the program as well as the likelihood that patients will manage their health appropriately and sustain the needed behavior changes," she says.

DM is most effective on a personalized basis, considering both the non-clinical and clinical factors likely to affect the uptake of given programs, says Tony Kieffer, VP, Braun Consulting. "For patients with chronic conditions, this personalized approach helps them with self-care, reinforces appropriate behavioral changes, coordinates treatment, monitors compliance and tracks outcomes on an individualized basis."

One MicroMass program that was created using the Rapport behavioral tailoring solution was the Connect and Control program for the Arthritis Foundation. As users visit the Foundation's Web site ([www.arthritis.org](http://www.arthritis.org)), they are offered an opt-in 18-week DM and lifestyle behavior change program developed and managed by MicroMass Communications' Rapport solution. "Individuals complete a survey of their current health and lifestyle practices. This information provides the basis for the tailored communications that help participants manage their arthritis," says Rob Deal, MicroMass director of strategic business.

Another ideal feature of an e-DM program is that it must be able to manage comorbidities. PeopleMed.com for congestive heart failure and diabetes allowed PacifiCare of Colorado "to more rapidly expand its chronic DM program to other diseases, specifically diabetes, while maintaining a high level of efficiency," says e-DM consultant Val Dean, MD, former PacifiCare of Colorado CEO and CMO. **MHE**

## ENGAGING THE PHYSICIAN

Few DM tools have links between the DM site and provider, says Raj Goel, chief technology officer at New York-based Brainlink International Inc. "As more providers go online and the MCOs allow the patients to share their DM data with the provider, the value of the DM to all three parties—patient, provider and MCO—will rise exponentially," Goel says.

For example, Mark R. McLaughlin, MD, of Springfield, Mass., who has a sub-specialty focus in complex spine surgery, uses SpineUniverse.com, a spine information "mall" for patients and physicians, to educate patients. "When the pre-evaluation information is sent to my new patients, they get a prescription for SpineUniverse.com with their diagnosis written on the prescription," she says. "When they arrive, they usually have focused, well-educated questions."

Similarly, at Jacob Teitelbaum, MD's

Web site, [www.endfatigue.com](http://www.endfatigue.com), chronic fatigue and fibromyalgia patients can access an online computer program that collects detailed information and does a complex analysis based on Teitelbaum's research. "Our treatment protocol focuses more on a very time-intensive evaluation by the physician," says Teitelbaum, director of the Annapolis Research Center for Effective Chronic Fatigue Syndrome/Fibromyalgia Therapies.



Deal

At Montefiore Medical Center, Bronx, N.Y., clinical analysts and champions from individual departments have been training to participate in the design of analytics to improve the process of care, says Eran Bellin, MD, director, outcomes analysis and decision support at Montefiore. "Emerging Health Information Technology has been building a Clinical Analyzer product that requires far less training, yet provides high-quality graphics with analytics vetted by statisticians and epidemi-