

Light paper

# The build vs partner debate: What's the verdict for member engagement platforms?

6 reasons why a partnership may be the optimal path for Medicare Advantage plans to address the health equity index, level-up member experience and be a 5-star plan



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## 6 Reasons to Partner for Medicare Advantage Success

# Explore how partnerships can boost health equity, enhance member experience, and achieve 5-star ratings.

An upcoming change in MA Star Ratings hinges on a critical factor - health equity. Is your member engagement platform truly fostering health equity? With the looming CMS deadline, the clock is ticking.

We're talking about the new health equity index (HEI) reward, slated to take place as part of the 2027<sup>1</sup> Star Ratings. If health insurers account for social risk factors in their member engagement programs, they could expect more favorable ratings from the recalculation—and get a competitive edge over other health plans hungry for the same market share.

As population health managers prepare for the change, many are investing in purpose-built member platforms that address the social determinants of health (SDOH) affecting older members, such as income disparities, loneliness, and isolation. These investments pay off in several ways, including delivering a more personalized member experience and driving critical actions like closing gaps in care. Proactively engaging members will not only meet regulatory requirements, it also dramatically improves member satisfaction – increasing star ratings and profitability.

### But here's the problem

Developing a sophisticated platform is time-consuming and expensive. It can take up to a decade—plus millions of dollars and teams upon teams of people—to build and train an AI-powered tool, and gain traction with member adoption and engagement. That's a lot more resources and especially time than health plans have left before the Star Rating change takes effect.

If the prospect of purchasing an enterprise-level member engagement technology has crossed your mind, there's a compelling reason to give it a second thought. Cue the power of partnership - dive deeper to discover why this might be your most strategic move yet.

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## A new dawn for health equity

The new health equity index reward is just one piece of CMS' broader efforts to promote health equity. As part of a 10-year plan—called the CMS Framework for Health Equity 2022-2032<sup>2</sup>—the centers have outlined multiple opportunities across multiple CMS programs, not just MA, to address disparities through data, policy, literacy, language, and beyond.

But the rapidly evolving MA market is indeed worth a call-out. Not only has the number of MA enrollees more than tripled in 15 years,<sup>3</sup> but the market itself is hypercompetitive. Many health plans see MA as their ticket to a better bottom line; health insurers with MA

contracts have comparatively done better financially than those without a presence in the MA market.<sup>4</sup>

These dynamics coincide with the expanding recognition of SDOHs which in pre-pandemic times were thought to drive 40% of health outcomes.<sup>5</sup> By now, that 40% may be even higher as the lasting impacts of COVID-19 materialize. We know that roughly a third of Americans<sup>6</sup> put off or skipped care during the worst of the crisis, a trend that may have triggered long-term effects on the health outcomes of older people.

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But when people consider SDOHs, things like income or housing insecurity generally come to mind. While those barriers can and do affect MA populations, seniors are also particularly vulnerable to overlooked social factors like loneliness and isolation. An estimated 1 in 4 retirement-age people are isolated from social connections, which can increase their risk for dementia by 50%, heart disease by 29%, and stroke by 32%.<sup>7</sup>

“Loneliness and isolation are insidious in that they can severely impact seniors’ access to healthcare without others realizing what’s going on,” said Dr. Jeffery Jacques, Chief Medical Officer at Personify Health. “It’s such a big concern that the Surgeon General recently issued an advisory calling for a national effort to improve social connections. It should be something health plans account for as they’re improving their approach to health equity.”

With these trends converging, the time is now to invest in a consumer engagement platform that meaningfully promotes health equity for MA members, adds Dr. Jacques.

“The MA market has shifted rapidly and health plans are certainly looking for any and every opportunity to address health inequities,” he said. “It has become imperative to create member-centric, personalized campaigns that address unique barriers—but then also scale that outreach so that it’s more deployable across entire populations. Member engagement platforms deliver the best of both those worlds.”

Internal builds may seem like the best option if you’re concerned about factors such as budget, or if you’re drawn to the lure of self-development. But that might not always be the most suitable choice. Indeed, partnering can offer unexpected advantages, such as these six:

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## 1. Speed to market

With a market as competitive as Medicare Advantage, urgency and efficiency are essential. If you're not offering an exceptional member platform, another health plan will. Plus, while the HEI recalculation isn't effective until 2027, health plans will need time to release any new platforms and meaningfully demonstrate that those programs are in fact promoting health equity.

"Equally critical to technology development is member adoption and engagement. Partnering with established engagement leaders eliminates the resistance that often accompanies new, untested systems. Members are more likely to engage with solutions that are personalized, intuitively designed,

and easy to navigate which accelerates proactive health management, and ultimately, improves health outcomes."

Partners like Personify Health also have the benefit of economy of scale. They can flex, react, and pivot more readily thanks to being powered by AI-powered tools that promote efficiency.

"Additionally, consider labor shortages in high-demand areas like software development," Dr. Jacques added. "Working with a partner affords you access to an already sourced pool of talent that you don't have to recruit and retain—yet another reason to buy instead of build."

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## 2. Focus

Building a meaningful member engagement platform comes with multiple complexities—doing so can be nuanced, high-risk, and requires a dedicated focus, adds Dr. Jacques.

“Not only should you consider the actual infrastructure of the platform, but there are also unexpected technical, compliance, and other hiccups to consider,” said Jeff Yoshimura, Chief Product Officer at Personify Health. “For example, think about accessibility or integration with point-to-point platforms. These and other implications can disrupt progress and delay timelines if you don’t have the expertise to address these challenges in real-time.”

By working with a partner that focuses on this kind of work day in and day out, health plans benefit from that experience so that teams can focus on internal high-value workflows and other pressing needs such as policy changes. Insurers can also redirect attention to other equity initiatives such as new benefit offerings or community outreach.

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### 3. Consumer expertise

Good enterprise platforms go far beyond technical features alone; they also provide comprehensive expertise about the consumers they aim to serve. While that expertise is often scaled with automation, it ultimately originates from and is made possible by humans. To that end, a platform might recommend certain best practices known to optimize outreach when it comes not just to engagement, but also for breaking through health equity barriers. Maybe it flags someone from a rural area in the south as benefitting from an interactive voice response

(IVR) with a southern accent, for example, or suggest a mail-order pharmacy for a fixed-income retiree. “Consumer expertise is absolutely essential if you’re reaching groups that may be especially prone to certain SDOHs,” Dr. Jacques said. “Recommendations across touchpoints and channels are there to make outreach stickier and more successful. If you know exactly how to engage audiences the first time, you’re also much more likely to see a more efficient use of resources for these tactics.”

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## 4. Insights and personalization

Consumer insights—along with the ability to act on those insights—are high-value commodities in health equity programs. After all, health plans can't adequately serve their members with resources such as transportation or food assistance until they more comprehensively understand who those members are.

"When working with a population susceptible to complex social barriers, you need to know where those people are coming from," Dr. Jacques said. "Of course, you want to know who the dual-eligible members are and who qualifies for subsidies, but you should also be asking other questions. Who has a disability? Who lives in rural areas? Who is recently widowed? Who can't get to appointments?"

Partners like Personify Health have access to consumer insights data that they've been collecting for years. This data provides a richer and more holistic view of members and can better inform engagement strategies, adds Dr. Jacques.

"The necessary granularity in consumer-level data is not always available to health plans if they're just relying on enrollment data," he said. "A health plan might be limited to what's on an intake form, but consumer insights provide more context that fills the gaps. Examples of insights that might only be available in a partner's consumer databank include knowing who lives in a food desert, who lacks high-speed Internet access, or who lacks a support network, for example."

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Using this information, health plans can then personalize outreach. But take heed: Seniors are not a homogenous population and neither are their barriers. Working with a partner and buying an established and proven engagement platform means that you not only get richer insights about healthcare inequities, but you also get the blueprint for what specific audiences need to solve for them.

Say, for instance, the data indicates a patient doesn't have a ride to her endocrinology visits; the engagement platform could recommend transportation resources that have been successful for others facing similar barriers in the past. Or someone is flagged as non-English speaking; maybe they get translated content or interpreter services.

"Personalization is already a model that's known to be quite successful when it comes to clinical care delivery for underserved populations," Dr. Jacques said. "Given the interconnected relationships between health outcomes and social determinants of health, personalization offers similar potential and promise for member engagement."



## Traditional view

- Claims data
- Clinical data such as:
  - Health conditions
  - Medications
  - Procedures



## View with consumer insights

- Claims data
- Clinical data
- Social determinants of health, such as:
  - Education
  - Job status
  - Relationships
  - Financial security/stability
  - Community safety
  - and many more...

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## 5. Integration

A partner's integrative capabilities should also factor into the build-versus-buy calculation, notes Dr. Jacques.

"Integrating the consumer data, next best actions, outreach activities, resources, and benefits all together into one seamless experience helps to identify and address health equity needs faster and more comprehensively," he said. "Plus, integrative experiences are simply easier to use and seniors are more likely to adopt technology if it's intuitive."

In many cases, partners can achieve that kind of continuity more easily given the fact that they already have the proven roadmaps and technical frameworks to integrate disparate channels together into an orchestrated outreach effort that's best positioned to address health equity.

For instance, say Bill is a 64-year-old with arthritis and a herniated disc. A sophisticated platform like Personify Health's VP Activate will have the insights to know he's receptive to SMS, IVR, and email. From there, the integrated platform might send out multiple targeted and group communications in a sequence that maps to Bill's patient journey—things like post-discharge information, preventive care reminders, a Medicare age-in email for plan selection, a pre-CAHPS survey, and an invitation to a musculoskeletal condition management program. And that all comes from a single system.

Still, "integration" isn't just about the technical infrastructure because an integrated operations team also matters. And unfortunately, health plans often have silos across analytics, marketing, and care management departments that can disrupt member experiences.

That's not usually the case with tech partners, though. By contrast, they're inherently integrated and not disparate, which gives them the advantage of moving more fluidly across analytics, outreach, care management, and beyond at a greater speed.

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## 6. Revenue growth

Working with a partner achieves cost savings and/or revenue growth across multiple dimensions—for the member, for the health plan, and for the healthcare system overall.

From a member's perspective, the integrated and resource-rich experience of an in-market platform may help users better overcome social disparities to improve their preventive health.

On the health plan's side, there's the HEI reward, for one thing. By working with a partner, insurers can potentially stand up a successful platform faster and start capturing the revenue advantages of improved Star Ratings as early as possible.

Health plans also benefit from the scalable cost savings of purchased platforms. The many different components of a purpose-built consumer engagement platform require a lot of upfront investment and talent, including full-time employees for data scientists, software developers, program managers, and more. That's money you don't have to spend with third-party solutions.

Consider also the down-the-line maintenance and innovation required to keep platforms relevant. Working with a partner that is wholly focused on platform improvement helps the tool stay current, compared with an internal initiative where the development team might consider it a temporary project that they can check off and then let sit untouched for years.

Lastly, there are the macro healthcare system benefits to consider—potentially better utilization of care, improved preventive care, reductions in care burdens, and more equitable healthcare for all.



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# The easier path to ready-made engagement

With the MA market getting more crowded and competitive than ever, health plans need every advantage they can get, and the new HEI reward is an obvious one to pursue. Digital is among the best ways to get there, as purpose-built member platforms can help health plans address SDOH, including those barriers that are disproportionately affecting seniors, like a lack of transportation, isolation, and loneliness.

But while the inclination may be to build a platform internally, remember that it can drive up costs and create unexpected problems down the road. By working with a dedicated and established platform, you potentially glean benefits an internal build might not deliver—such as speed to market, expert focus, consumer expertise, insights, personalization, integration, and revenue growth.

**If you're looking for such a platform, consider partnering with Personify Health.**

The company with a global reputation for engagement that's trusted by top health plans too. It has a proven solution to help Medicare Advantage plans fast track their member engagement efforts without the time, expenses, and hassles that come with self-development. Learn more at <https://www.virginpulse.com/vpactivate-healthplan/>.

## The benefits of partnering



**Speed to Market**



**Insights and Personalization**



**Focus**



**Integration**



**Consumer Expertise**



**Revenue Grown**

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Personify Health, previously known as Virgin Pulse, is the first and only personalized health platform to provide health plan administration, holistic wellbeing solutions, and comprehensive health navigation—all in one place.

Personalized, human-centric, and powerfully simple, Personify Health helps organizations optimize healthcare investments while empowering people to engage more deeply with their health. Personify Health addresses the issues of increasing healthcare costs and complexity by breaking down traditional silos and rejecting a one-size-fits-all mentality.

Backed by decades of experience and global operations, Personify brings together health, wellbeing, navigation, and benefits solutions to offer a first-of-its-kind personalized health platform.

Our AI-powered outreach solution provides health plans with a data-driven, personalized experience that educates and activates

members of all ages and demographics, delivering health improvements and demonstrable results, including:

- Reduced member risk and costs
- Enhanced member experience and loyalty/enrollment
- Improved Stars & HEDIS scores
- Increased revenue and growth

Founded in 2004 and headquartered in Providence, RI, Personify Health impacts over 100 million people across 190 countries by helping Fortune 500, national health plans, and many other organizations change lives—and businesses—for good.

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