



STATE OF WISCONSIN
Department of Employee Trust Funds
 Robert J. Conlin
 SECRETARY

Wisconsin Department
 of Employee Trust Funds
 PO Box 7931
 Madison WI 53707-7931
 1-877-533-5020 (toll free)
 Fax 608-267-4549
 etf.wi.gov

Correspondence Memorandum

Date: October 12, 2020

To: Group Insurance Board

From: Rachel Carabell, Senior Health Policy Advisor
 Molly Heisterkamp, Wellness and Disease Management Program Manager
 Tom Rasmussen, Life Insurance Program Manager
 Brian Stamm, Deputy Director
 Office of Strategic Health Policy

Subject: Strategic Initiative on Emergency Room Use

This memo is for informational purposes only. No Board action is required.


Overview of the Initiative

As part of its strategy discussions earlier in 2020 ([Ref. GIB | 2.5.20 | 5](#) and [Ref. GIB | 5.13.20 | 7b](#)), the Group Insurance Board (Board) discussed the strategic initiative to reduce Group Health Insurance Program (GHIP) costs for emergency room visits. Specifically, the goal of the initiative is to reduce visits to the emergency room that can be served at alternative sites of care that are more appropriate and lower cost. The initiative is broken into two parts. Part 1 of the initiative focuses on an educational approach to reduce avoidable emergency room visits and is already underway. Part 2 of the initiative will focus on improving access to alternative types of care and consideration of benefit changes or other incentives to encourage more appropriate use of the emergency room and other care options.

This memo provides an update on the status of the initiative.

Background

At its May 2020 meeting, the Board learned about an analysis conducted by IBM Watson Health (IBM) on emergency room use that found that an estimated 67% of emergency room visits, or 21,494 visits, were avoidable. Avoidable visits are either non-emergent, meaning they don't need to be addressed within 12 hours, or are emergent but could be treated effectively and safely in another care setting such as urgent care or a physician's office. This rate of avoidable emergency room visits is consistent with benchmark data from other IBM clients.

Reviewed and approved by Eileen K Mallow, Director, Office of Strategic Health Policy  Electronically Signed 11/6/20

Board	Mtg Date	Item #
GIB	11.18.20	4A

Based on guidance provided by IBM from its experience with other clients, ETF believes that an ongoing educational campaign for members on the appropriate use of emergency rooms and alternative sites of care can be effective at reducing avoidable emergency room use. Based on preliminary calculations, each percentage point of redirection of care from the ER equates to approximately \$320,000 in savings. To sustain this savings, IBM indicates that educational efforts must be sustained.

The analysis conducted by IBM found that avoidable emergency room use is greatest among children and during the weekends when doctors' offices and urgent care centers may not be open. Additional analysis identified the most common clinical symptoms associated with avoidable emergency room use are headaches, migraines, upper neck pain, and upper respiratory infections, including sinus infections and bronchitis. ETF's educational efforts will address these issues by increasing member awareness of alternative sites and methods of care, such as urgent care, telehealth, and same-day office visits, as well as when and how to access these types of care. For condition-specific materials, ETF will explore creating educational materials on the scope of the problem, ways to prevent or manage the problem, and appropriate treatment pathways to discuss with the member's doctor.

Current Activities

Since the May Board meeting update, ETF has made progress in five key areas (Survey of GHIP Members, Communication Plan, Coordination with Health Plans, Coordination with Employers, and DAISI Data Analysis) that are described in more detail below.

Survey of GHIP Members

In July and August 2020, ETF conducted a survey of GHIP members about their knowledge, use and preferences regarding emergency rooms and other sites of care. This survey will provide baseline data that will be used to determine the effectiveness of the Board's initiative. A similar survey is scheduled for 2022 that will be compared to this baseline survey. Additionally, survey results will be used to highlight unmet needs of our membership and guide education materials related to appropriate site of care utilization. A report on the survey is attached as an appendix to this memo.

Communication Plan

ETF is developing a comprehensive communication plan that will focus on the infrastructure for a sustained educational effort around appropriate use of emergency rooms and other sites of care and to develop additional content.

Initial efforts will begin in the fourth quarter of 2020 with a focus on developing branding and a dedicated resource page on ETF's website, which can serve as a platform for current and future materials. ETF expects to start rolling out new material throughout 2021.

ETF also utilized the *2021 Health Benefits Decision Guides* to educate members about their options when they need care fast as seen in the graphic below.

Need Care Fast? Know Your Options

When you need medical care, it's important to know where to turn. See etf.wi.gov/video/get-medical-care-when-you-need-it-fast for a video that explains your options, including what makes sense for you and your wallet. Many health plans also offer a 24-hour nurseline. A nurseline may be useful to determine what type of care is most appropriate for your symptoms.

Telehealth	Doctor's Office	Urgent Care	Emergency Care
Fast, usually within 30 minutes	Same day appointments may be available	Expanded hours, open evenings and weekends	24/7 access
\$	\$\$	\$\$\$	\$\$\$\$
Minor, non-emergency medical needs	When you need in-person care	Non-life threatening, immediate medical needs	Serious medical needs

Source: [ETF 2021 Health Benefits Decision Guide for State Employees](#)

Additional content will include templates to coordinate communication efforts with health plans, targeted content for parents, and symptom-specific content related to headaches, migraines, and upper respiratory conditions. Content targeted to specific populations will be developed from reputable sources and vetted by medical staff at the health plans. This content will then be used to develop web materials, videos, newsletter articles, and other materials for distribution to GHIP members.

Key Communication Activity	Focus
Branding and Web Resource Development	Develop a shared and recognized brand for the initiative and have a central location to host all related communications.
Upper Respiratory Infection / Acute Bronchitis	Provide guidance on preventing condition, managing it, and having appropriate steps to take if professional care is needed.
Headache / Migraine / Neck Pain	Provide guidance on preventing condition, managing it, and having appropriate steps to take if professional care is needed.
Where to Get Care for Young Children	Raise awareness on steps parents can take to ensure they are seeking appropriate health care for their young children.
Employer and Health Plan Engagement and General Initiative Support	Provide templates and guidance to employers and health plans on actionable steps they can take to support education and communication efforts. Update existing content and utilize internal channels of communication regularly.

Coordination with Health Plans

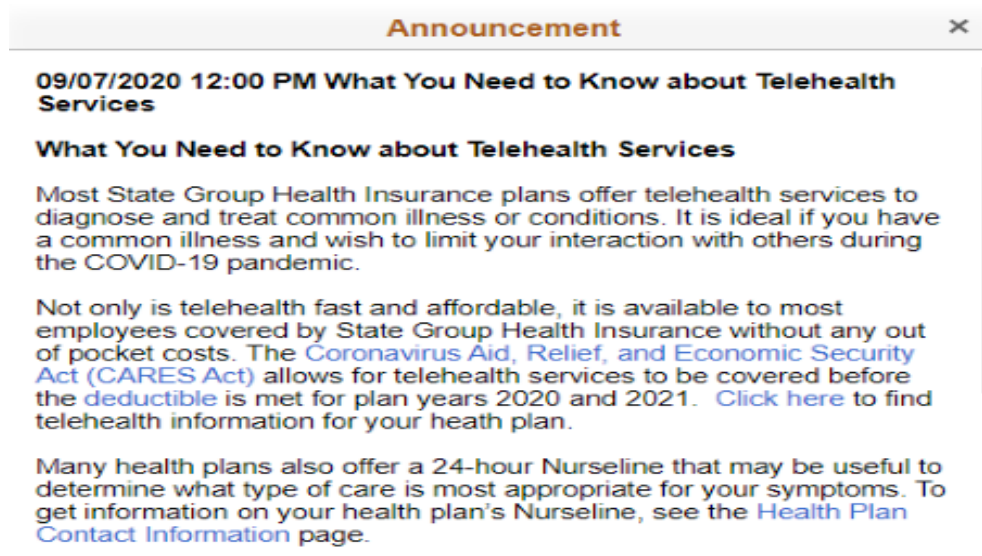
ETF continues to look for other channels to provide materials directly to members. In June 2020, ETF staff met with three health plans to discuss opportunities to reduce avoidable emergency room use through education and communication. These health plans were selected because of their size and self-reported interest in participating in the project.

ETF learned what the health plans were doing to educate their members about appropriate use of emergency rooms and other sites of care. ETF shared the results of IBM's analysis and encouraged these plans to enhance their educational efforts. ETF and the plans committed to coordinating efforts by sharing data analysis, identifying opportunities to coordinate communication through enhanced branding, use of ETF's website, and creating shared templates for communication.

In 2020, prior to the annual open enrollment period (September 28 to October 23), two health plans rolled out new educational materials regarding care options for their members that are consistent with the messaging of ETF's Get Care Fast materials. ETF will expand these efforts to additional health plans in 2021 through its Council on Health Program Improvement.

Coordination with Employers

In July, ETF met with Department of Administration (DOA) staff and agreed to work together to communicate care options to state agency employees, initially using existing ETF materials. These discussions resulted in the following announcement recently appearing on the landing page of the state employees' payroll and benefits system, known as STAR. DOA has identified additional opportunities to share ETF materials with GHIP members as additional content is developed. In addition, ETF and DOA will work with human resources staff at specific state agencies with high rates of avoidable ER use to identify opportunities for education.



Announcement ×

09/07/2020 12:00 PM What You Need to Know about Telehealth Services

What You Need to Know about Telehealth Services

Most State Group Health Insurance plans offer telehealth services to diagnose and treat common illness or conditions. It is ideal if you have a common illness and wish to limit your interaction with others during the COVID-19 pandemic.

Not only is telehealth fast and affordable, it is available to most employees covered by State Group Health Insurance without any out of pocket costs. The [Coronavirus Aid, Relief, and Economic Security Act \(CARES Act\)](#) allows for telehealth services to be covered before the deductible is met for plan years 2020 and 2021. [Click here](#) to find telehealth information for your health plan.

Many health plans also offer a 24-hour Nurseline that may be useful to determine what type of care is most appropriate for your symptoms. To get information on your health plan's Nurseline, see the [Health Plan Contact Information](#) page.

DAISI Data Analysis

ETF continues to work with its data analytics team to develop insights into the utilization data available in DAISI. The analytics team is currently developing a flexible reporting dashboard which will allow ETF to look at ER utilization by health plan and by employer by year. The analytics team is also working on an analysis of urgent care locations relative to high avoidable emergency room use.

Staff will be available at the meeting to answer any questions.

Attachment: Report on ETF Survey – “Medical Care When You Need It Fast”

Office of Strategic Health Policy

*Report on ETF Survey – “Medical Care When You Need It
Fast”*



October 1, 2020

Prepared for Group Insurance Board, November 18, 2020

Background

Earlier in 2020, the Board prioritized several strategic initiatives for ETF to pursue to achieve the goals of the Health Care Triple Aim. One of these initiatives is the strategic initiative on emergency room use. This initiative seeks to redirect members from emergency rooms to other care options, including urgent care, telehealth, and primary care, when appropriate. Part one of the initiative started in late 2019 and will continue into 2022 and is focused on increased education and targeted messaging to members through partnerships with health plans and employers. Part two of the initiative will focus on improving access to other care options and possibly benefit design changes.

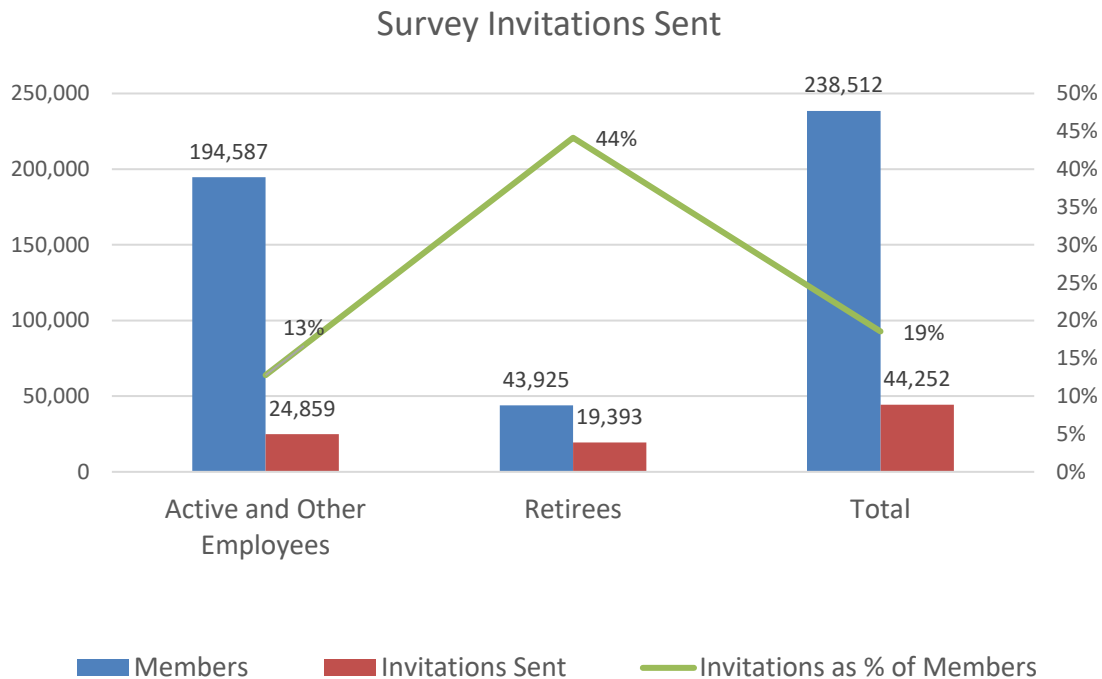
As part of the initiative, ETF surveyed GHIP members regarding their knowledge and use of emergency rooms, urgent care, telehealth, primary care, and nurselines. The goal of the survey is to establish a baseline to evaluate the effectiveness of the strategic initiative by comparing results to a second survey in 2022. ETF will also use survey results to help focus on education topics as part of this initiative.

Survey Development and Methodology

The survey was prepared by staff in ETF’s Office of Strategic Health Policy (OSHP) with the support of staff from ETF’s Bureau of Data Management. Statistical analysis of survey responses was provided by OSHP’s Data Analytics unit. The survey was developed using the on-line survey tool, Survey Monkey. ETF’s Office of Communications distributed the survey via email to active and retired members for whom ETF has email addresses and who are enrolled in GHIP. The email addresses that ETF has are voluntarily provided by members and therefore not representative of all GHIP members. The total number of email addresses receiving the survey was 44,264. Of this number, 24,859 were associated with active employees and 19,393 were associated with retired subscribers.

Below is a chart showing the total number of active employees and retired members as of July 2020 and the number of active employees and retired members sent an invitation to participate in the survey.

Chart 1: Number of Survey Invitations Sent



The survey asked up to 19 questions regarding individuals’ preferences and experience using emergency rooms, urgent care, telehealth services, same day appointments with their doctor, and nurse lines. The survey also asked individuals to provide demographic information, including their age, gender, county of residence, number and age of dependents, and what health plan they were enrolled with. Survey responses were anonymous.

Survey Implementation

The survey was sent in two waves. The first wave, which included approximately half the email addresses, was sent on July 14, 2020. The second wave was sent two days later on July 16. On July 30, a reminder email was sent to those who had not yet responded to the survey. On August 14, ETF closed the survey to additional responses.

Prior to releasing the survey, ETF used a variety of channels to let employers, subscribers, and members know the survey was coming, including its social media channels and its newsletters.

Survey Responses

The overall response rate for the survey was very positive at 35% (15,469 responses out of 44,262 survey invitations), resulting in a statistically valid sample of those who were invited to participate in the survey.

Overall, more responses were received from retirees (8,287) than from active employees (7,182). While more active employees received invitations to participate than retirees (24,859 and 19,393 invitations, respectively), the response rate was higher among retirees (43%) than active employees (29%). See chart 2 below.

Chart 2: Survey Response Rates

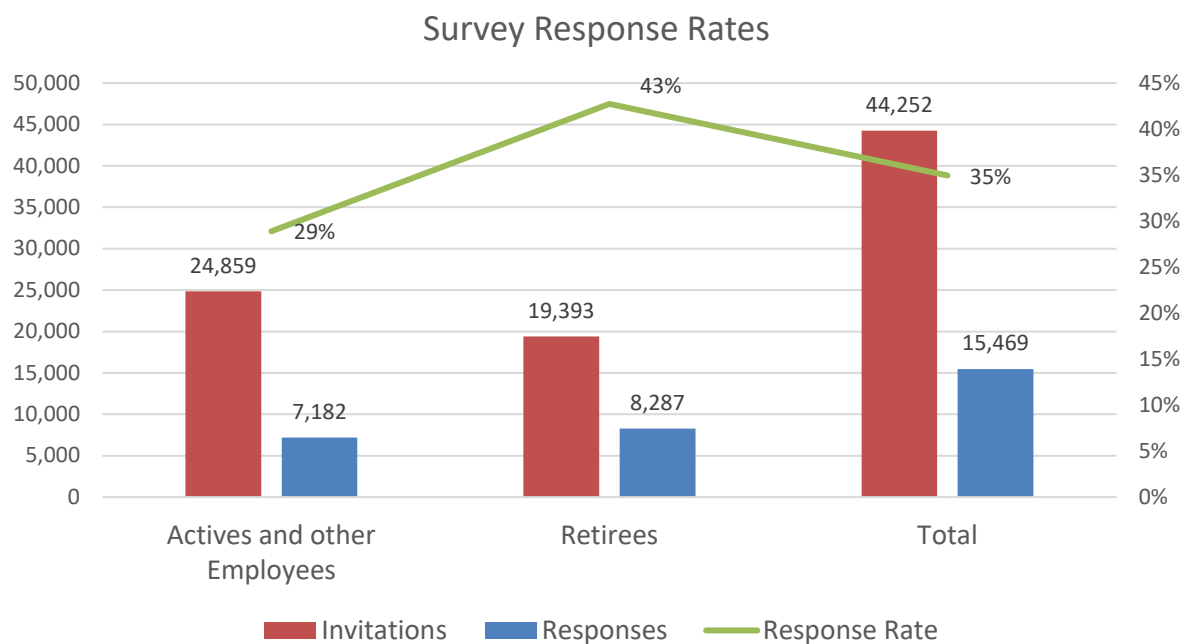
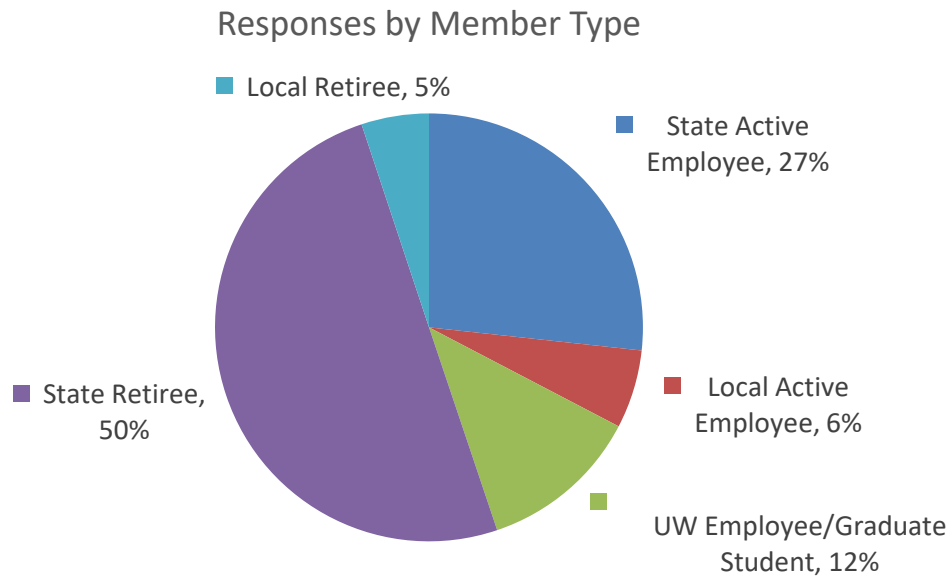


Chart 3 shows a more detailed breakdown of survey response by member type:

Chart 3: Responses by Member Type

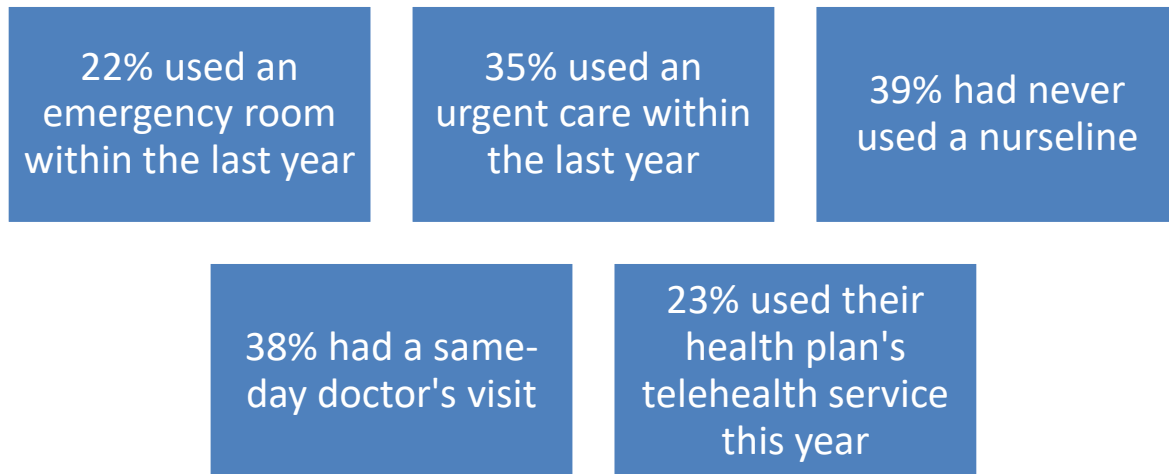


In addition, of those responding to the survey, 38% reside in Dane County and 7% reside outside of Wisconsin. Survey responses are skewed towards older members with 63% indicating they were 60 years of age or older.

ETF is currently reviewing the survey responses to ensure the statistical validity of the responses to each question. ETF will also review responses by demographic information and health plan membership.

Key Findings

The survey found that responding members used the following options when they needed care quickly:



An initial review of survey responses indicates that members need more education on the following topics:

- Telehealth
- Same-day appointments
- Nurselines

Telehealth

Twenty-three percent (23%) of responders indicated they used their plan’s telehealth service this year. Based on a review of the responses, it appears some of the telehealth services the members received included informal telehealth services quickly developed in response to the COVID-19 pandemic. When asked what could be improved, members expressed a need for more information on the types of visits for which telehealth is appropriate. Additionally, many members indicated they had challenges with lack of high-speed internet, lack of video capability, and general discomfort with technology. ETF already promotes telehealth services to members and will continue to add more emphasis around appropriate times to utilize telehealth as new educational materials are developed in 2021.

Same-day Appointments

Thirty-eight (38%) of responders indicated they were able to contact their primary care provider and schedule a same-day appointment. Many primary care provider offices hold a percentage of appointments available for same-day or walk-in appointments. This can be a convenient way for patients to obtain care when they need it quickly. These visits also have lower out-of-pocket costs than other options and care can be more easily coordinated with a member’s

other health care needs. Survey responses indicate that up to 50% of members did not know this option may be available. ETF has already started to promote same-day appointments as an option when members need care fast and will continue to do so in 2021. ETF will also work with health plans and employers to promote this option.

Nurselines

Thirty-nine percent (39%) of responders indicated they had previously used a nurseline. Nurselines can be a valuable triage service when members are not sure where to go, but by design are not able to diagnose and treat members. Feedback from the survey shows both a general lack of awareness of the existence of nurselines or how to access these services. Additionally, there seems to be confusion on the difference between the capabilities of a nurseline and a telehealth provider. This points to an opportunity to help educate our members on the appropriate use of nurselines.

The confusion on the difference between nurselines and telehealth may be caused because much of the use of telehealth in 2020 appears to be related to the rapid deployment of telehealth services in response to the country’s COVID-19 pandemic, some of which have included more informal models of telehealth. This impact will have to be considered when ETF conducts the follow-up survey in 2022.

Next Steps

Below are ETF’s next steps related to the survey:

- Complete further data analysis. While the response rate to the survey was impressive, there is an over-representation of certain demographic characteristics in the response population. ETF is working on slicing the data by these demographic identifiers and will then perform an adjustment technique to be representative of the entire ETF membership population. Following the adjustment, analysis will be performed to identify statistically significant associations, which will help guide future interventions. This analysis is scheduled for Board review in February.
- Incorporate survey feedback into ETF’s communication plan on emergency room use by educating members on the appropriate use of alternative sites of care, including telehealth, same-day office visits, and nurselines. While ETF already promotes these alternative sites of care when communicating with members about their options when they need care fast, ETF will put renewed emphasis on which options are most appropriate depending on a member’s need when rolling out additional materials in 2021.
- Share survey feedback with health plans, employers, members, and internal ETF staff. Survey results will be posted on ETF’s website after ETF completes its analysis of the responses in early 2021. ETF will notify members and employers about the survey results through electronic bulletins, newsletters, social media, and employer meetings. ETF will share survey results directly with the health plans in early 2021.

- Repeat the survey in the summer of 2022 to evaluate the impact of the Board’s strategic initiative on emergency room use and identify areas for improvement in the future.