COVID Could Revolutionize How MAOs Address Isolated Seniors

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Since COVID-19 reached pandemic status in mid-March, Medicare Advantage and other insurers have had to swap out many of their face-to-face interactions with members for telephonic and digital options. But for seniors who may be accustomed to visiting community centers, attending fitness classes or receiving a regular visit from a companion or meal delivery person, loneliness they may have already been feeling could worsen. Or they may be experiencing social isolation that's impacting their mental health or ability to self-manage chronic conditions.

For a closer look at loneliness and social isolation in the time of COVID-19, AIS Health gathered insights from a panel of experts on how the current pandemic is forcing MA insurers to rethink their strategies to address such issues and how it could permanently alter the way they interact with members.

"This is a critical time for Medicare Advantage plans to reach out to their members, and let them know that the MA plan leadership and their health care providers care about each member's physical and mental well-being in this midst of this crisis, and to share relevant resources to help members stay and feel connected," says Bruce Chernof, M.D., president and CEO of **The SCAN Foundation**. In the first month of social distancing due to the new coronavirus, 33% of people age 70 or older reported experiencing feelings of loneliness, according to a recent survey conducted by NORC at the University of Chicago and co-funded by The John A. Hartford Foundation and The SCAN Foundation. Moreover, 39% of survey respondents said they canceled or delayed non-essential medical treatment, 32% said they put off primary or preventive care, and 15% reported delaying or canceling an essential medical treatment.

Meanwhile, 21% of respondents said they have had a telehealth appointment since the start of the pandemic, and about half (49%) of those individuals said the experience was about the same as an in-person visit.

"We are seeing encouraging signs of rapid telehealth adoption, and MA plans can help lead the charge," says Chernof. "They can work with contract providers to outline telehealth adoption protocols and safety features, identify members' willingness and capacity to use this technology, and offer how-to resources to members about initiating a telehealth relationship with their existing providers in the MA plan network."

Chernof recommends that plans adopt virtual technology for their existing nurse navigation programs, enabling nurses to identify and triage key issues for members with complex care needs and to help enrollees get acclimated to a "telehealth-first environment." MA plans could also use their charitable giving/community benefit resources to support local organizations that are doing telephonic outreach to older adults in order to decrease social isolation.

SCAN Health Plan Supports Local 'Gems'

As part of its recent $5.1 million commitment to address a variety of needs for vulnerable seniors and others during the pandemic, **SCAN Health Plan** is supporting the Institute on Aging's Friendship Line, a 24-hour crisis hotline that is specific to older adults. "There are resources out there that are gems of the community and we want to make sure they keep going," says Eve Gelb, senior vice president of healthcare services. Based in Long Beach, Calif., SCAN is a nonprofit provider of MA and Special Needs Plans (SNPs).

Gelb says the organization began continuity-of-business planning in late February and started making outbound calls to at-risk members in mid-March. The first phase involved modifying its regular outreach to vulnerable SNP members with additional questions related to their needs during the crisis. The plan also includes questions about members' living situation in its regular health risk assessments of SNP members and was able to determine early on who might be at heightened risk of social isolation and in need of additional supports. To reach its broader population, SCAN enlisted the help of employees throughout the organization whose face-to-face work had been suspended due to social distancing guidelines.

"The biggest need that we find, other than really the loneliness and wanting somebody to talk to, is food," Gelb tells AIS Health. And since SCAN already had a meal delivery benefit in place, it expanded qualifying criteria beyond Special Supplemental Benefits for the Chronically Ill to "anybody who was in need of food," she says. SCAN has also used its community-giving resources to support area food banks and Meals on Wheels programs, and other organizations providing friendly caller programs.

Patrick Glavey, senior leader of Medicare with **MVP Health Care**, says the insurer recognized "pretty quickly" that social isolation could create issues for its 67,000 MA members in New York and Vermont. So MVP immediately began making calls to its most vulnerable members to make sure they had access to care and address any food security or other issues that may require intervention, he tells AIS Health.

"A lot of them have just really enjoyed the chat, and the calls can go anywhere from a couple minutes to what I heard yesterday was our longest, 54 minutes. I think it all depends on how they're feeling and whether they want to talk. But they've certainly been very appreciative of getting the calls even if they didn't really need it; they were glad that someone did reach out."

Glavey says MVP has also seen an increase in seniors' use of technology, and that utilization of its urgent care and routine visit telehealth options among the 65-and-older population went from 4.4% in February to 14.4% in April.

In addition, the insurer had to transition some of its health promotion and fitness classes from an in-person setting to an online platform. And while participants tend to enjoy the social aspect of attending those classes, adoption of the virtual classes has demonstrated that MVP might want to offer a mix of online and in-person classes in the future even when social distancing measures have been relaxed.

"I think one of the silver linings of this is seniors jumping into technology in ways that they didn't want to before," remarks Gelb. "And while that technology is not a replacement for real human interaction and contact, I think it expands the possibilities for how we can engage with people, sort of in the 'in between' times."

"While there are many lonely and socially isolated people in the world, even pre-COVID, nobody was focusing on this population," says Cyndy Jordan, who founded mobile technology provider **Pyx Health** with the most vulnerable Medicare and Medicaid members in mind. "And I think [that's because] there was this mental block around how do you scale a solution that helps address loneliness and social isolation, and if it's technology, that's a non-starter in this population."

But Jordan tells AIS Health that in its first two years in the market, Pyx Health has demonstrated that the smartphone is the best way to reach this population, since owning a phone with a data plan is much more common than having a laptop or wireless internet. Through a "super funny, empathetic chatbot," the Pyx Health app uses artificial intelligence to engage a member, create a connection and empower people to take control of their chronic loneliness through sustained behavioral changes, asserts Jordan. Users can also ask questions of live people or receive calls from friendly voices staffed in Pyx Health's compassionate call center.

"In our personal opinion, loneliness is a condition and it needs to be treated just like any other condition (e.g., diabetes, heart disease)," she adds. "And unless you start helping people self-manage around loneliness, the decline is going to continue to be pervasive." The chatbot can help insurers obtain information about social determinants of health, or it can be used to work through "risk-stratified lists" from the payers that want to engage their lonely members.

Since the onset of COVID-19, Pyx Health has seen a marked increase in app utilization and increasing interest from MA insurers. Pyx Health started out in Medicaid and is on track to have signed seven new contracts by the end of April, two of which are among the top six Medicaid/MA payers in the country, according to a spokesperson.

Banner Health Network (BHN)/University Health Plans, which has had success using the Pyx Health technology to support transitions of care for its Medicaid, long-term care and dual-eligible populations in Arizona, has incorporated the tool into its multi-pronged approach to reach members and providers during the pandemic.

"None of us could have predicted this unprecedented time, but I believe this is the perfect" opportunity to maximize the use of technology and deploy a tool like the Pyx Health app, says Sandra Stein, M.D., medical director for care integration with BHN, a clinically integrated network and accountable care organization. "Almost the whole world is facing social distancing, but that social distancing doesn't have to turn into social isolation and loneliness." She tells AIS Health that prior to the pandemic, the organization had been talking about rolling out the tool more broadly through BHN to include value-based contracts for Medicare and commercial populations, and the app's applicability during the COVID-19 crisis has accelerated that conversation.

Finally, **ConnectiCare**, a subsidiary of EmblemHealth, has made nearly 20,000 calls through its "Peace of Mind" initiative since mid-March, according to spokesperson Kim Kann. Nurse care managers from the plan are calling MA and other members who may be more vulnerable to the coronavirus due to medical conditions or their age, and ConnectiCare's service team is making similar calls to members who have previously visited ConnectiCare centers that are temporarily closed. This outreach provides critical information to keep members safe, and it can help with needs that fall into the social determinants of health category.

"Members appreciate us taking the time to call and see how they're doing. Some members have specific questions or topics they want to discuss. Others just enjoy chatting," Kann tells AIS Health. "We will continue checking in [with] our members and looking for ways we can help. These calls are personal for us. Connecticut is our home. We know we're serving our friends, families and neighbors."

An additional "silver lining" of the pandemic, adds Gelb, is that more people now understand how it feels to be socially isolated. "When you talk to a lot of older adults they say, 'My life really hasn't changed with COVID, nobody was coming to visit me anyway, I wasn't really going out.' I'm really hopeful that this will spur more people to do outreach, engage with older adults, recognize that social isolation is a real problem and support people who are experiencing that."

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