

Executive Spotlight—SCAN Health Plan CEO Wing has a passion for keeping seniors independent

by [Jacqueline Renfrow](#) | May 13, 2019



CEO Chris Wing is proud to be a part of the SCAN Health Plan mission to bring independence to seniors in California. (SCAN Health Plan)

Chris Wing's passion for healthcare began at the age of eight, when a traumatic event left his father in need of constant physical care. Without the ability and resources for home care, Wing's father died four years later in a nursing home.

Now, Wing is proud to be a part of the SCAN Health Plan mission to bring independence to seniors in California. Over the course of 42 years, SCAN's vision has never wavered: keeping seniors healthy and independent.

SCAN was founded by a group of senior activists as a nonprofit dedicated to bringing together experts in medicine, gerontology, psychology and social services. Today, the organization has expanded its reach to work with insurance companies, home health product companies and food delivery services, all in the name of helping seniors remain at home.

The healthcare sector remains in flux as policy, regulation, technology and trends shape the market. FierceHealthcare subscribers rely on our suite of newsletters as their must-read source for the latest news, analysis and data impacting their world. Sign up today to get healthcare news and updates delivered to your inbox and read on the go.

“Anytime we keep a senior out of a nursing home, angels in heaven ring a special bell,” Wing, CEO of SCAN, told FierceHealthcare.

As the U.S. population continues to age, the needs of seniors in California ring true for patients everywhere. And there will always be a small portion of the population that will need the intense care given at a nursing home. However, following a trip to the emergency department, given the right resources, a vast majority of these seniors can return home.

In his eighth year with the company, Wing is proud of his work—and having fun. He manages around 1,300 employees, all of whom can recite SCAN’s mission.

“I want to be the CEO that keeps seniors out of nursing homes,” Wing said

Here's more from our conversation:

FierceHealthcare: What are your personal goals as CEO of SCAN?

Chris Wing: SCAN was always a great property, but there was a phase in 2011 when it had some challenges. In Arizona, the company was losing between \$30 million and \$40 million annually and losing some of its Medicare market share in California. In addition, the California Department of Health Care Services determined that prior to 2008, it had used a flawed formula for determining payments to SCAN for its dual-eligible special needs plans. Although SCAN was not at fault for the overage, SCAN voluntarily refunded the overpayments related to the contracts in question in 2012.

SCAN exited Arizona in 2016. Then the company set up a completely new team. Now, SCAN is the fastest growing non-Kaiser health plan in California. We had to get the system stable and replace everyone on the team. It was not just a

More about Chris Wing
Age: 61
Home: Seal Beach, California
First job: At 12 years old I became a janitor.
What would you be doing for a career if you had it to do again? I wouldn't change a thing.
Favorite ways to spend downtime? My wife and I love to travel. We've been to over 80 countries. I also run, surf and go to the gym.
Best part of living in Southern California? Close to my children, friends and of course, the beach.
Favorite way to keep healthy? Eating well and regular exercise 4 to 5 times a week.

turnaround, we needed to fix the platform in order to make this mission alive and to transform senior care in California.

We are a not-for-profit, and in 2018 we had a 1.2% operating margin. And we use almost 40% of that margin to try new things every year.

For example, two new programs we are trying include putting behavioralists in senior homes when we suspect a diagnosis of depression or bipolar disorder. The senior receives 15 treatments and it's a significant tool. We have also discovered that caregivers are more prone to depression than we thought they were. Let's say you work, have a couple of kids at home and now you have to take care of mom or dad. You're giving up your career and your social life, it makes sense that these people are more likely to be depressed. So we have our behavioralist treating them as well.

FH: Healthcare is in the headlines. What issues are you watching?

CW: There is a lot going on. I have spent more time in D.C. in the last six months than in the previous six years. Most recently, the CMS is putting limits on drug rebates. We are big fans of transparency and rebates and drug companies have a history of not being transparent. It has been 15 years now and the program has come to rely on this.

FH: And what if the government repeals the Affordable Care Act?

CW: The ACA is the law of the land. The entire healthcare system over the last 10 years has been about volume, not value.

We need to partner with Medicare Advantage as a backbone to our strategy. The great thing about Medicare Advantage is when you go back to D.C., it's the only thing that Republicans and Democrats agree on. It's helping providers and seniors to give and get better care. A greater portion of seniors is now choosing this option. Administrations may come and go, but Medicare Advantage and its benefits to the social determinants of health are here to stay. Now we need to focus on how we can make it better.

We are in favor of the Medicare Advantage star rating program and its support of non-Medicare benefits to help seniors.

FH: What keeps you up at night?

CW: There are two amazing trends in healthcare that are positive: technology and **social determinants of health**. So as a company, we need to decide, "Where do I invest?"

While CMS is giving greater flexibility to states on how to spend their funding, it's sad to see how many seniors still suffer from isolation and food deserts. We at SCAN are trying to change this through programs such as senior advocacy. We found that a 75-year-old male didn't want to talk to a 35-year-old female nurse, so we are matching people up with peers to talk to them as a trusted source to help close the gaps in care. We are capturing these peer advocate stories to share with our employees in order to show them how we are making our mission statement real.

One example was a SCAN member in San Diego who was enrolled in Scripps and spent almost 15 years in social isolation. His wife was gone and he had a diagnosis of Parkinson's disease. Now, he is enrolled in a shadow boxing class with other people with Parkinson's. It's giving him joy and reducing his isolation, in addition to aerobic activity and balance.

How much does it cost the system? Having a social worker or a care navigator reach out is minimal. And I don't know how you measure the quality of life, but it seems that this man is having a better quality of life and he's staying out of the emergency department. So for a nominal investment, we can transform the quality of life, while reducing healthcare costs to the system.

We need technology to wrap around these seniors and help them navigate the system. There are now all kinds of digital companies that can improve experience and reduce costs in the healthcare industry, and I'm currently wrestling with our bids for 2020. How much do I put into social services and how much do I put into digital technology? If I had the right answer, I'd be retired.

FH: What will healthcare look like in 2025?

CW: There will be some commercial plans and some Medicaid. But I think you're going to see Medicare Advantage look differently than it does now. The critical model will change. With some seniors facing four or more chronic conditions, we need to be the delivery system of urgent care into the home system. And when it comes to social determinants of health, we need to see more investment across the board.

Plus, you're going to see more care rendered through virtual means, whether it be telephonic encounters or via video. I can see this happening where there is a virtual hub that offers members present at a clinic access to a behaviorist, primary care provider and specialists. I believe we won't always be last in value for health behind other countries. I see some major changes on the horizon and it's very exciting.

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