



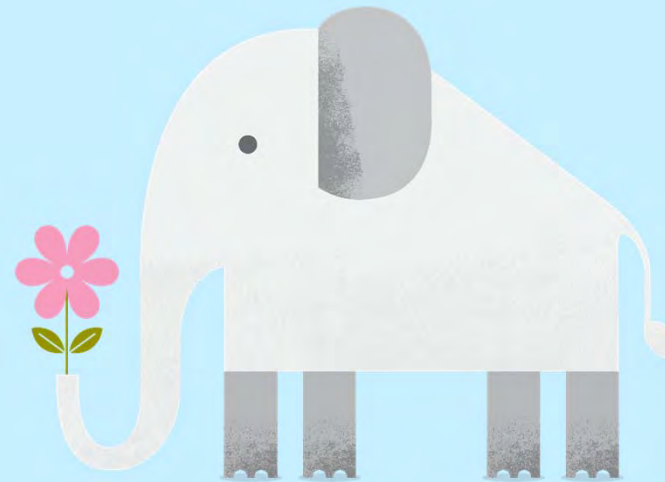
# Insurers as partners in digital healthcare of the future

Dr Stan Goldstein 2016

# Are Insurers even relevant?

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- What's in it for insurers?
- Where are the patients before and after hospital episodes?
- Limitations
- Environment changing
- Where does “digital” fit in?
- Partnering
- What have we been doing?



## What's in it for Insurers (PHI)?

Why is there an insurer here at all?

- *Insurers do have a belief that healthier customers and optimum clinical care will be good for customers and less expensive.*
- *They also have a belief that “information asymmetry” makes it harder for patients to make the best decisions ... for them.*  
*Note recent problems in oncology in NSW.*
- *The majority of insurers (and certainly Bupa) are pursuing the role of partner to patients and providers, and looking for “gaps” that, if “filled”, could deliver better outcomes and a viable, sustainable health system.*
- *What sort of gaps are we talking about?*
- *Health – before and after hospital*





# Limitations

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- In Australia, by legislation, health insurers are proscribed from interfering in clinical decisions-making  
That is, they can't tell clinicians what treatment to provide.
- Patients have an in-built protection anyway: they generally trust the health professionals they see and are not so trusting of health insurers to guide their health decisions, even though they say (IPSOS Surveys) they would like more help from insurers



# Changing health and health care environments

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consider a demographic and environmental evolution

- Ageing population (including a large number of healthier, older people)
- Increasing prevalence of chronic disease
- Developing technologies
- Societal changes – monumental shift in connectivity
- Knowledge explosion
- Societal and individual expectations of clinicians and the health system




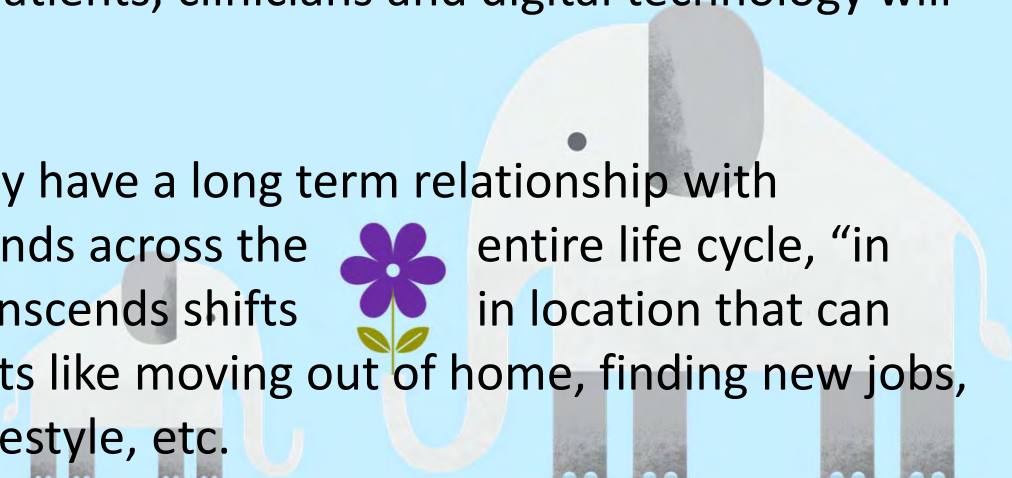
## Where does “digital” fit in

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Few (sensible and informed people) would argue if a digital revolution is facing healthcare. It is another matter though as to whether people realise or believe that despite enormous investment in computing systems and digital technology already, this revolution is only at its beginning.

In all likelihood there will be some fundamental shifts in how health services are delivered and who is delivering them. Some of our roles as clinicians, and the interactions between patients, clinicians and digital technology will almost certainly be changed.

Insurers have assessed that they have a long term relationship with customers that potentially extends across the sickness and in health”, and transcends shifts  entire life cycle, “in in location that can accompany significant life events like moving out of home, finding new jobs, marriage, divorce, choices of lifestyle, etc.



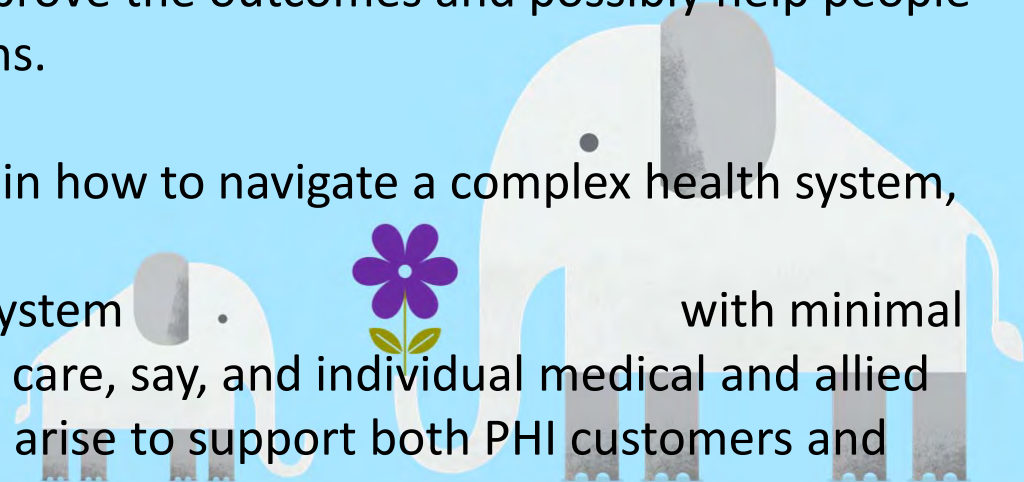
## Where does “digital” fit in

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In the context of a health system designed to deliver largely episodic care, and designed to prioritise the management of acute health problems primarily, this is where most of the larger private health insurers have seen opportunities and have been working on ways to fill perceived gaps – potential improvement points.

We can't really help people with cuts, bruises or appendicitis, but there are significant opportunities to improve the outcomes and possibly help people manage their chronic conditions.

There may be knowledge gaps in how to navigate a complex health system, and in a mixed public-private system with minimal coordination between hospital care, say, and individual medical and allied health practices, opportunities arise to support both PHI customers and others to avoid slipping between cracks or following sub-optimal paths.



# Partnering

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## **Not Rocket Science**

- Relationship with 3.64 million people covered
- Lifetime and life cycle relationship with many of these
- Clinical Service Provision and Sources of Knowledge and Expertise in the hands and minds of others

## **Find partners with aligned aims objectives and values**

## **Work towards innovation, improvement and outcomes**

- Clinicians and Academics
- Colleges, Societies and interest groups
- Hospitals and hospital groups
- NGOs
- Other insurers
- Research Institutes and Universities
- Technology companies
- Philanthopists
- Consumer groups
  - Governments
  - Our members / your patients
  - Others



## More on partnering

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Spaces between the silos are seen as gaps. So PHIs aren't designing ways of creating yet more silos.

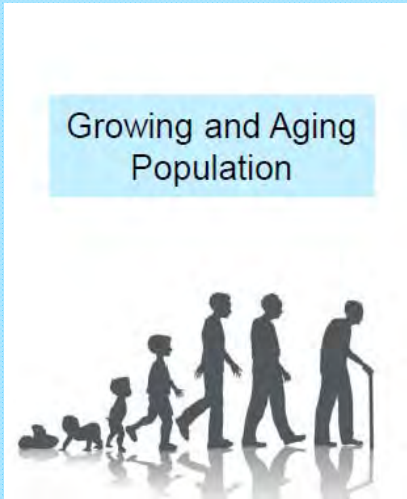
They largely see themselves as partnering with their customers, with the health care teams of their customers, with health professionals and health organisations, with NGOs and even with government, in order to deliver something that will sustainably improve health and quality of life outcomes, including satisfaction with health care experiences.

And it's not just about PHI customers. Sometimes you have to help the system work better for everyone in order to be able to achieve a benefit for PHI customers, and that's win-win.

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# Meeting the Challenges of Future Health Care

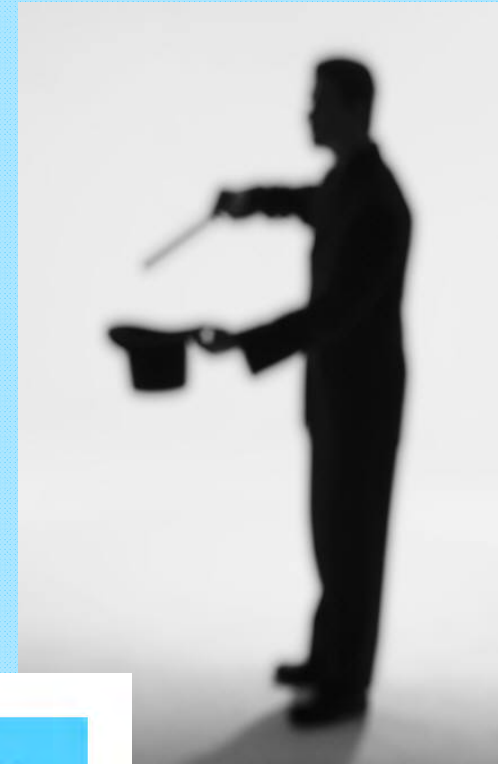
Growing and Aging Population



Enough of the theory!

Is there some substance?

Is there anything being done?



Increasing Prevalence of Chronic Disease



New Technologies



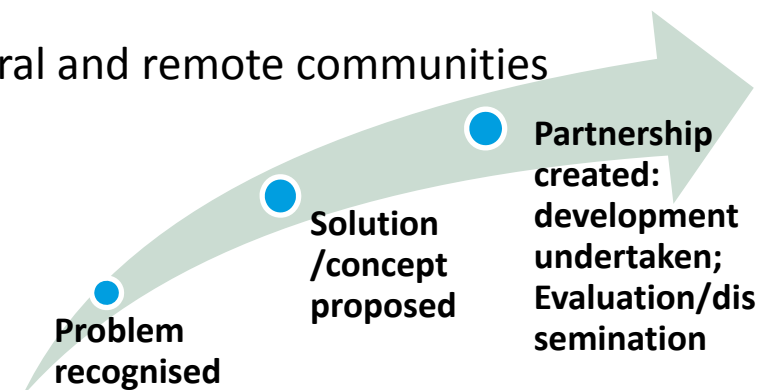


## What has Bupa been up to?

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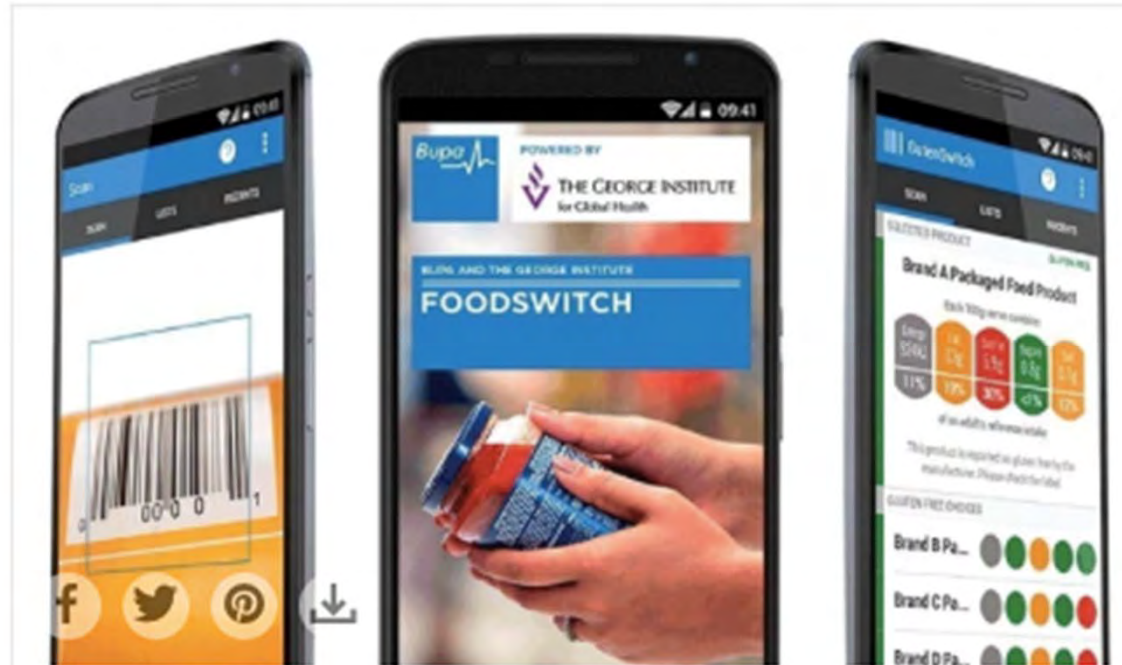
### Examples of digital health in the PHI environment

- FoodSwitch
- Integrated Osteoarthritis Program
- MyJointPain
- MumMatters
- MedAdvisor
- EnableMe
- Cancer Survivor Support platform – The Cancer Institute NSW
- GenesisCare – reporting on quality
- Digital Diabetes
- Far West Homes telemedicine support for rural and remote communities
- Telemonitoring
- Medibank's Carelink coordinated care
- Big Data
- Artificial Intelligence applications





# FoodSwitch – improving the quality of food and food intake



## Raising awareness became part of the cardiology prescription

JUN 29, 2015, 08:35 ET

News provided by  
[Buzinga App Development](#) →



### **FoodSwitch Hits Appstore #1 Position, Becomes Buzinga App Development's Biggest App**

Achieving over 600,000 downloads worldwide, FoodSwitch just became the leading food-scanning app in the Australian Appstore. The app, which helps people make better informed choices at the supermarket and at home, is now the most successful one for developer Buzinga.

# partnering with The George Institute



## How



## Select



FoodSwitch needs.

If you're using SugarSwitch, you'll get a list of healthier choices with lower amounts of fat, and total

If you're using GlutenSwitch,

### Scan Switch

Use the app to scan a product's barcode.

View the product's Health Star Rating (HSR) score, and see the nutritional information for the product.

If you're using the app, you'll see a list of healthier choices.

When you scan a food product you'll also get a list of healthier choices you can switch to.

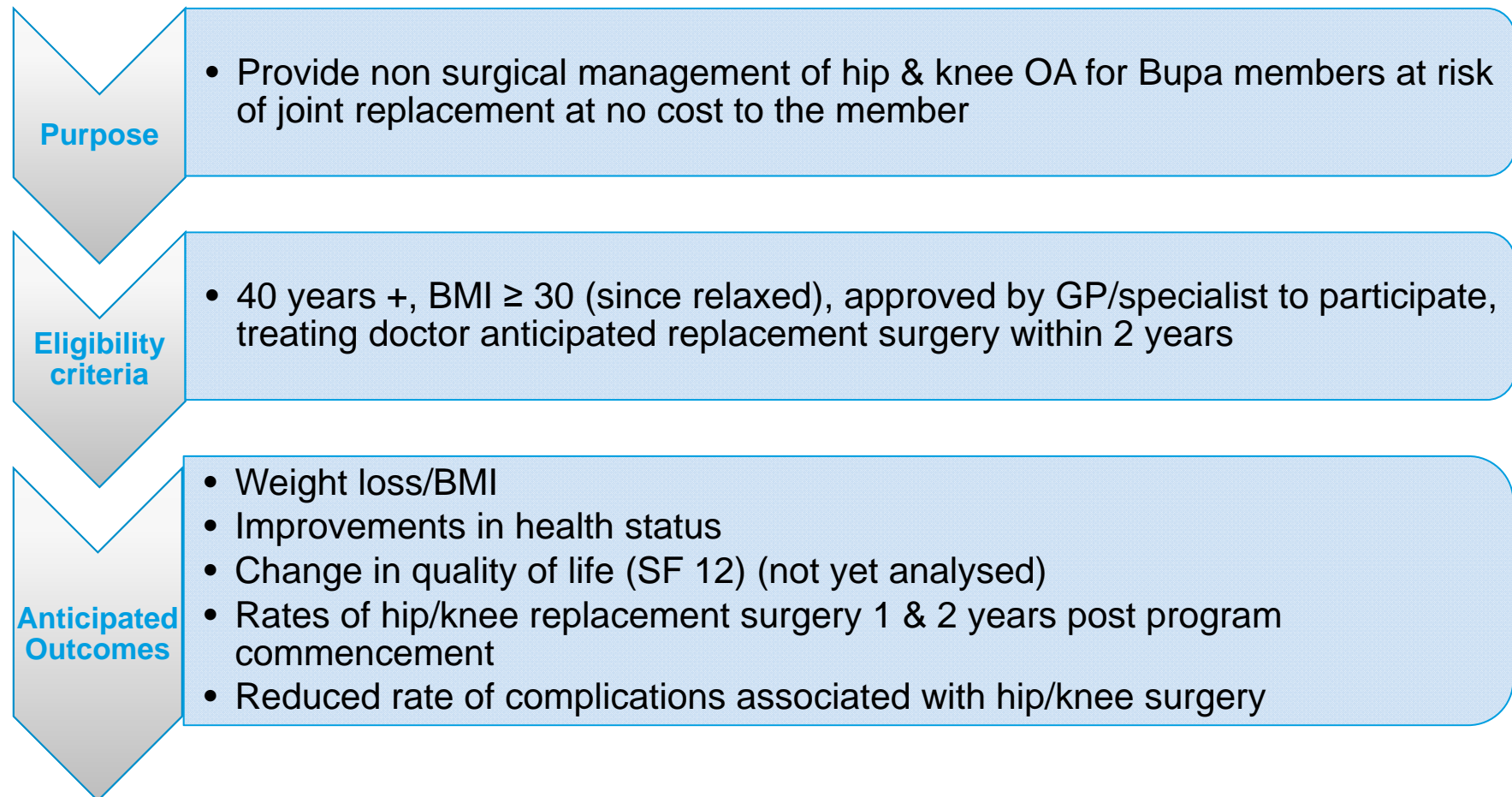
No matter which filter you're using, healthier choices are first identified by comparing the overall nutritional value of foods based on the Health Star Rating score algorithm, taking into account a range of different factors important to general health including saturated fat, sugars, salt, energy, protein, dietary fibre, fruit, vegetables, nuts, and legumes (FVNL) content, and for some products, calcium.





# Joint Replacement Surgery and OA Management Program Pilot

- Since 2010, Bupa has offered an Integrated Osteoarthritis management program to Bupa members





## Participation & Weight Loss

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Preliminary findings based on 1,447 Bupa members, recruited through various means, including letter to member with previous history of arthroscopy, notification via newsletter, and direct referral from GP or specialist ...

- Average age was 63 years
- 72% female
- Average starting BMI was 34.82 or weight 94kgs
- 72% of members completed 18 week program
- Weight loss for program completers:

<b>Weight loss as a percent of starting weight</b>	<b>% completers (n=566)</b>
5% or more	76%
10% or more	31%
15% or more	7%

## Potential Comparator Study

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An American study (Hamel et al 2008) with a clinically similar patient population found 29% of patients had joint replacement surgery during 12 months of follow-up

In the Integrated Osteoarthritis Program cohort, 9% of completers went on to have replacement surgery within 12 months of completion – better outcome than was expected.

Optimistically we might reason that there has been a significant reduction in the rate of joint replacement surgery for members completing the program, possibly of the order of 20%



Based on the average cost of hip & joint replacement:

\$26,000 AUD (private sector including rehab cost) or

\$18,000 (public sector 2010) per arthroplasty

ROI of the 18 week program to all patients, completers and non-completers was **3.8 : 1**

# partnering with Prima Health



Arthritis AUSTRALIA

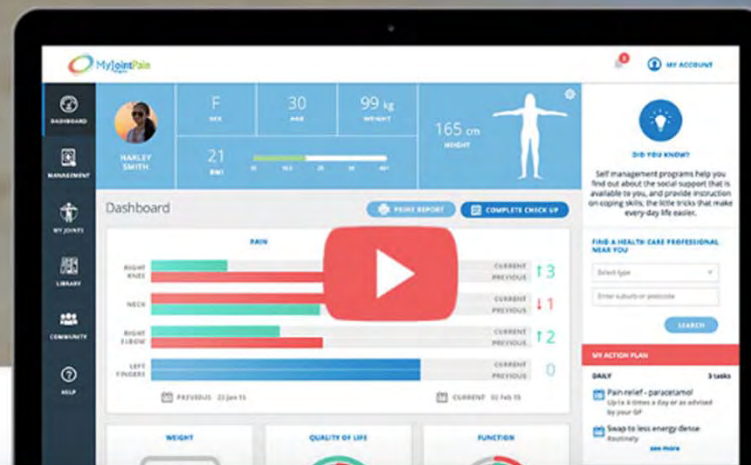
LOG IN

SIGN UP FREE

Got joint pain? Get long term relief.

Let MyJointPain.org.au show you how.

SIGN UP FOR FREE NOW!



led to partnering with Arthritis Australia – *myJointPain*

# Problems with perinatal mental wellbeing – national screening not reaching the private sector – a digital solution?



## Pregnant or recently had a baby?

**Protecting your emotional wellness is important for you and your loved ones.**

Take 5 minutes to look after your wellbeing with mummatters.

[Download now](#)



### **mummatters**

Pregnancy, and the years after baby's arrival, can be wonderful, but it's common for women to experience a range of emotions during this time.

Staying emotionally well can have real benefits for you and your family. But how many of us actively protect our wellbeing?

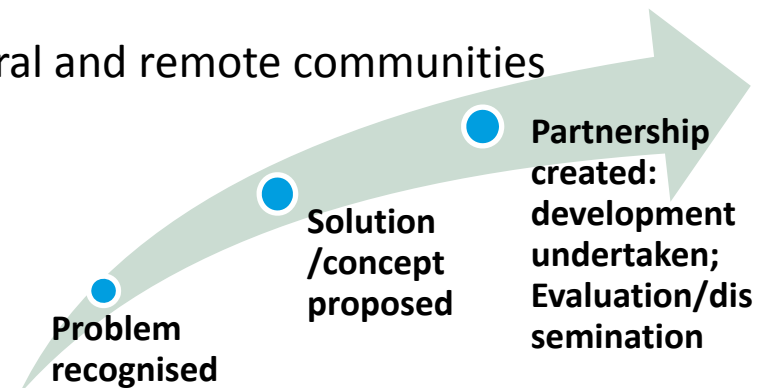


## and the story continues

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# Questions?

