

MASSACHUSETTS

Blue Cross Blue Shield of Massachusetts is an Independent Licensee of the Blue Cross and Blue Shield Association

We have tools and analytics at our disposal. We are using these to identify interventions and develop a plan that will make an effective impact on increasing the well visit rates for employees at Shipping Centers.

Identify interventions to increase the well visit rate and narrow the gap to HEDIS 90th percentile for all populations at Shipping Centers. This will be achieved with effective, culturally appropriate approaches for those segments with the largest disparities.

THE ANALYSIS

Technology enables us to:

Leverage disparities analytics to identify financial and clinical opportunities across all populations and to develop action plans to address our findings.

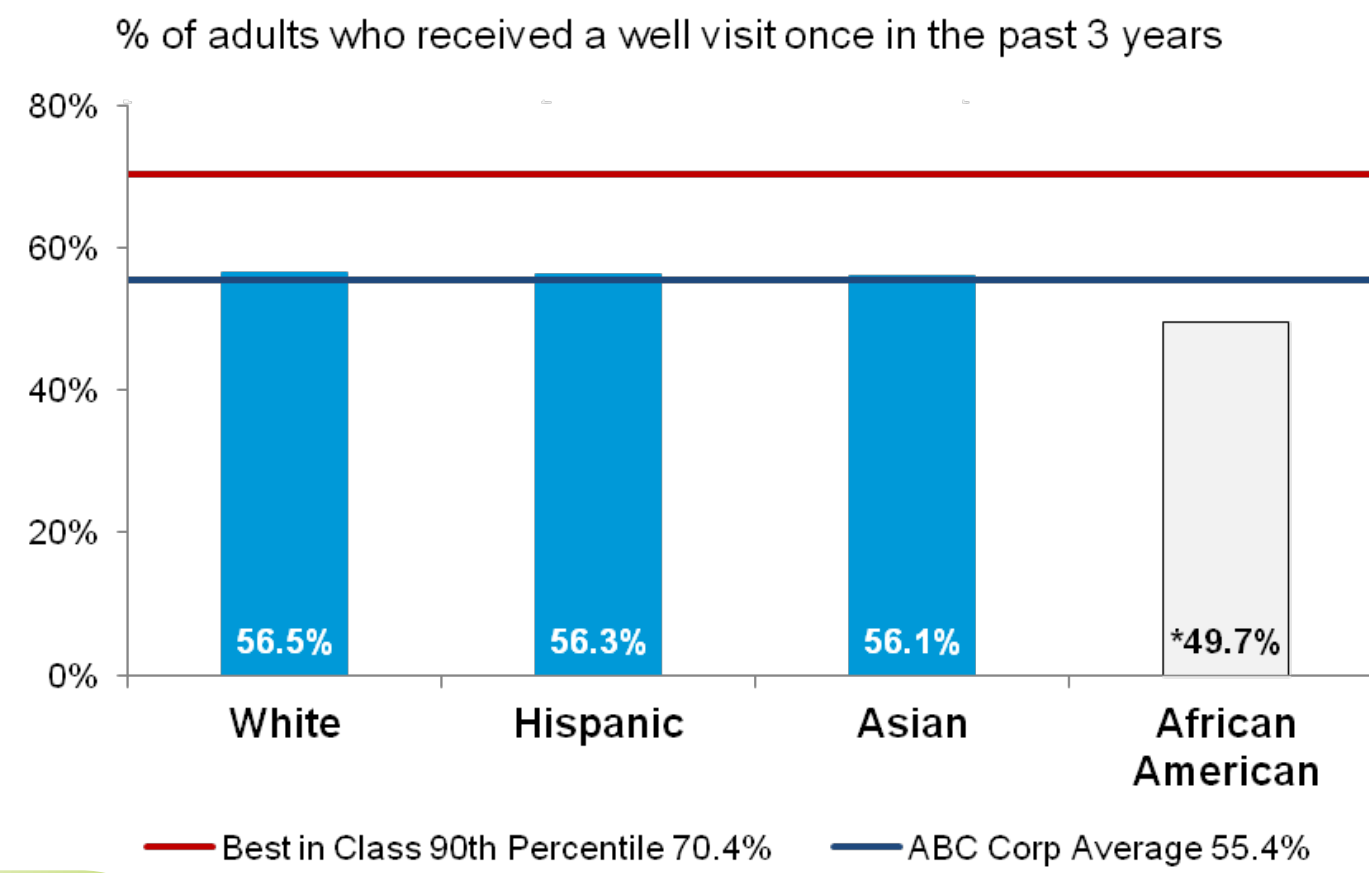
Raising awareness is important:

It is challenging to reduce disparities and deliver results because disparities have complex origins. We will start with identification and awareness.

How to improve outcomes:

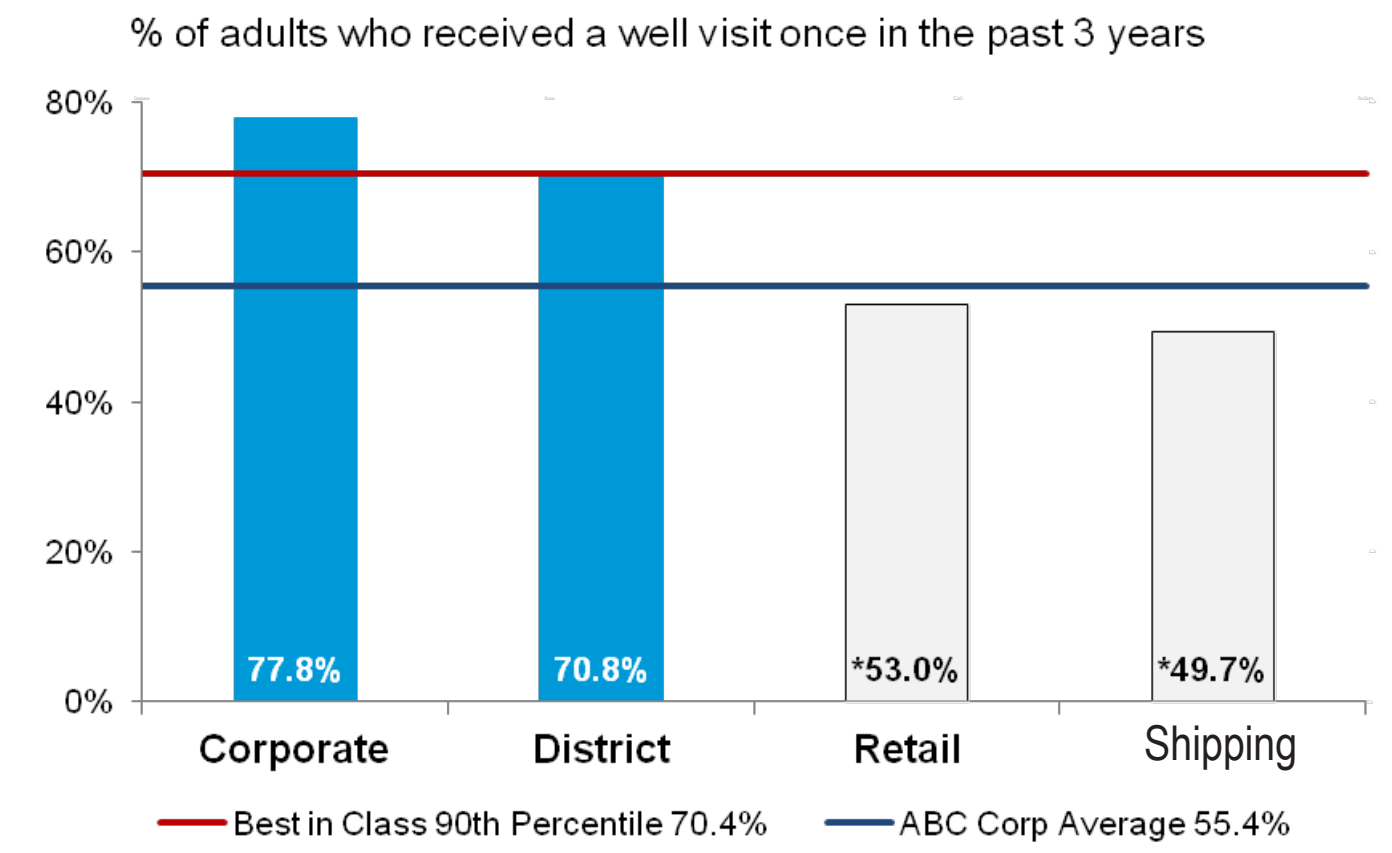
Our position gives us the opportunity to identify and improve key employer access, condition and quality metrics by finding variances (i.e., disparities) hidden within overall averages.

ABC Corp: Well-Visit Rate by Race/Ethnicity



- African Americans' rates are lower than others
- Non-filled and starred results are significantly different

ABC Corp: Well-Visit Rate by Work Environment



THE RESEARCH

We know from the literature that there are barriers to accessing primary care clinicians, such as:

- Transportation
- Child/dependent care
- Cost concerns
- Time off from work
- Cultural beliefs
- Physical access to primary care services
- Mistrust of the medical system

We have engaged our BCBSMA Employee Resource Groups to help brainstorm and validate interventions that would improve access to primary care clinicians.

THE IDENTIFIED INTERVENTIONS



Use analytics, population health expertise and local employer and community resources to improve well visit rates.

1

Education is necessary but not sufficient. Communicate the importance of having a primary care clinician you are comfortable with via multi-culturally sensitive channels, and explain the copays. Offer multiple language capabilities, and reinforce that seeing a primary care clinician is just as important when you feel well as when you are sick. Overcoming mistrust of the medical care system, mistrust of translators, and fear of costs incurred is essential.

2

Work with employees, local Community Resources, and local provider leaders to identify local culturally competent providers, who are nearby and close to public transportation, and have multiple language capabilities. Multi-lingual Providers, not translators, are critical in order to connect with members.

3

Identify and communicate childcare and transportation options for employees – to help get to appointments.

4

Provide easy Shipping Center access to a Community Health Worker (or equivalent) who is bilingual and knows the local providers, to help Shipping Center employees without a primary care clinician, to find one, identify child care and transportation opportunities, and actually make an appointment for the member. If this is ineffective, consider calling employees without a well visit and offering to help.

5

Measure improvements in the well visit rate.

6

THE NEXT STEPS

- Develop a collaborative implementation team with the Shipping Centers and community
- Develop a project plan which integrates common tasks, identifies which tasks must proceed sequentially, and which are possible in parallel
- Develop specific, measurable goals for Shipping Centers, around well visit rates

THE DISPARITIES MITIGATION CYCLE

