6.1 Telephone Triage to Reduce Out-of-Network Utilization: Kaiser Permanente

Systems providing telephone triage may also reduce out-of-network utilization by directing patients to the most appropriate in-network sites of care. A program developed for the emergency department of Kaiser Permanente in Southern California had this goal in mind as it addressed the issue of escalating costs for non-plan emergency services and out-of-plan hospital admissions. Kaiser developed the Emergency Prospective Review/Critical Care Transport program and provided 24-hour access to a Kaiser Permanente emergency physician staffing the program for out-of-plan community emergency departments. This program was designed to help triage Kaiser patients to the appropriate level of plan or out-of-plan care. In using the program, patients who were stable were transported to a Kaiser location for treatment while patients who needed immediate out-of-plan care were assigned a case manager to monitor their care and service needs. This program resulted in notable cost savings for Kaiser from both reductions in unwarranted admissions and reductions of redundant tests in the emergency department (Salber and Parsons 2001).


6.2 Telephone Triage Overseas

Telephone triage has also found success overseas. In England, a telephone triage program using nurses was developed to provide service for patients requesting same-day attention in a general practice setting. This study found that the nurse triage program reduced both the number of appointments and the number of home health visits for patients. In addition, patients reportedly appreciated the opportunity to speak directly with a healthcare professional (Vorster 1999).


6.3 Building or Buying a Demand Management Program

The decision to build or buy a demand management program differs depending on the type of strategy an organization wishes to pursue. One of the key components of many demand management approaches is some sort of relational database that analyzes different types of patient data to evaluate health risks and patient care needs. For organizations that have not collected the demographic, clinical, and health risk information to make these analytic evaluations possible, it is valuable to seek this information and expertise elsewhere (Bell 1996).

Another important component of many demand management strategies is the ability to provide 24-hour-a-day operations to support multiple patients. Many commercial demand management vendors enjoy considerable economies of scale by offering such services to
multiple clients, and they can pass on such savings to their contractors. Pricing from vendors is typically on a per-member per-month (PMPM) basis that is derived from estimates about utilization for a target population (Bell 1996).

For telephone triage services, the decision whether to build the services in-house or purchase them as a whole or in part from outside vendors depends largely on projected call volume and overall organizational strategy for managing risk and consumer demand. The higher the call volume anticipated and the more tied into a full range of population health management services designed to manage demand and risk, the more likely it is that an organization will benefit from developing call center capabilities in-house. However, outsourcing telephone triage services may be an attractive option for many healthcare organizations, especially those that anticipate a smaller call volume. Vendors offer a full range of services and include different payment options, including charging on a per-call basis for covered members.

A telephone call center can also consolidate other telephone services that may be linked to demand management, including wellness class scheduling, advice and referrals, and other disease-specific information or hot lines (Sabin 1998). Separate from demand management strategies, call center operations are increasing in popularity because of their potential to improve communications with and responsiveness to patients as a marketing strategy for healthcare organizations (Stier 1999).

Developing a telephone triage capacity in-house involves a number of costs. Typical expenses include the purchase of telephone triage software, capital start-up costs, and staffing. Additional expenses might include leasing space for a call center, buying self-care manuals and audio library materials, computers, desks, and other office furniture and supplies (Sabin 1998). Implementation of an in-house system also involves considerations such as planning, development, and customization, as well as marketing the service to both providers and users. Physician buy-in regarding telephone triage activities is also crucial, and involving physicians in planning and development decisions will help ensure program success within the organization (Sabin 1998).

Whether building, leasing, or buying components of a demand management program, such services become extensions of the healthcare delivery system or health plan offering them. It is important to monitor and maintain clinical quality, encouraging early and thorough involvement of medical personnel in the development, implementation, and operational stages (Bell, 1996). Ultimately, involving physicians and nurses in the design, testing, evaluation, and operations of any demand management program helps ensure clinical quality.


6.4 Demand Management Companies

Access Health Group, based in Broomfield, Colorado, is a subsidiary of McKesson HBOC Inc., based in San Francisco. Access Health is considered the leading provider of call center services and has determined how to provide such services both efficiently and cost-effectively. At the end of 1998, Access Health had about 1,200 employees, including more than 500 registered nurses. A range of care management services are offered to more than 2,000 managed care organizations, provider groups, employers, integrated delivery systems and government programs. Access Health specifically provides call center services for provider organizations, including nurse telephone hotlines. Their demand management services rely upon software that prompt nurses to ask callers questions based on their clinical algorithms. In January 1999, Access Health reportedly served more than 34 million people nationwide, or 13 percent of the U.S. population. Managed care customers covered by the Access Health Group have included Anthem Blue Cross and Blue Shield, Blue Cross of California, Blue Cross and Blue Shield of Florida, Blue Cross and Blue Shield of Massachusetts, Highmark Blue Cross and Blue Shield, and Humana (see accesshealth.com and mckhboc.com for more information).

Health Decisions International (HDI), based in Golden, Colorado, is a wholly owned subsidiary of OnHealth Network Company, which is described as an on-line health and wellness destination. HDI was founded in 1992 by Dr. Donald Vickery who is credited with initiating the Demand Management process. HDI has developed a comprehensive set of demand management services that it offers to both employers and health insurance providers. Its focus on healthcare decision support services reflects the belief that informing patients about their healthcare decisions potentially leads to more appropriate utilization of medical care services. Demand management services offered by HDI include a 24-hour telephone service for members that is nondirective and nonprescriptive, analyses of health plan profiles indicating member utilization of healthcare services, and self-care handbooks. Services are comprehensive and can be customized based on client needs (see onhealth.com and hdi.com for more information).

Optum®, based in McLean, Virginia, is a subsidiary company of the UnitedHealth Group, and is the other large national provider of call center demand management services. Optum’s Care24 provides consumer access to nurses, counselors, and other professionals who assist with health and medical concerns, emotional and behavioral issues, legal concerns, dependent care needs, and even workplace problems. Optum’s NurseLine enables users to speak with a registered nurse or listen to audio messages to educate them about managing their demand for healthcare services. Optum recently integrated its interactive on-line service, Health Forums, into its Care24, Nurseline, and Assistance programs to provide 24-hour Internet access to health and well-being information. The Health Forums line also provides customized web sites, a library of health references, and e-mail functions that allow users to e-mail questions to clinical professionals available through Optum. As of March, 1999, Optum served more than 15 million Americans with access to 24-hour services (see optumcare.com and unitedhealthgroup.com for more information).