

Bellin Health

A Triple Aim Improvement Story

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AUTHORS:

John W. Whittington, MD: Senior Fellow and Lead Triple Aim Faculty, IHI Kevin Nolan, MA: Senior Fellow, IHI Niñon Lewis, MS: Executive Director, IHI Trissa Torres, MD, MSPH, FACPM: Senior Vice President, IHI

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Introduction

This example of Bellin Health was originally published in the journal article, "<u>Pursuing the Triple</u> <u>Aim: The First Seven Years</u>" [Whittington JW, Nolan K, Lewis N, Torres T. Pursuing the Triple Aim: The first seven years. *The Milbank Quarterly*. 2015;93(2):263-300.].

Drawing on the Institute for Healthcare Improvement's (IHI) seven years of experience, *The Milbank Quarterly* article describes three core components that guided the organizations and communities working with IHI on the Triple Aim: creating the right foundation for population management, managing services at scale for the population, and establishing a learning system to drive and sustain the work over time. The article also provides case examples of two organizations (Bellin Health of Green Bay, Wisconsin, and Chinle Service Unit of the US Indian Health Service), to illustrate the execution of all three of the Triple Aim's components.

In the article, Bellin Health is included as an example that illustrates the evolution of a health system that began working with an enrolled population, built skills over time, expanded its Triple Aim work to include more populations, and eventually became involved with a multistakeholder group focused on a regional population.

NOTE: We have maintained the original numbering of the Tables, Figures, and references as published in *The Milbank Quarterly* article. Reprinted with permission.

Bellin Health: Green Bay, Wisconsin

In 2007, IHI invited Bellin Health, an integrated health care delivery system based in Green Bay, Wisconsin, to participate in the Triple Aim initiative. At that time, Bellin had been working for several years on the three dimensions of the Triple Aim, albeit without labeling it as such.

- **Population of focus:** Employees of a health system and their spouses as an enrolled subpopulation.
- Governance structure: Bellin Health organizational leadership.
- **Challenge and purpose:** Bellin's transformation began in the early 2000s, when the health system faced a growing competitive and financial challenge as insurance costs to cover its own employees were projected to rise by 30 percent. At the time, Bellin's health benefit cost was approximately \$10 million, but the organization did not have a clear sense of how those costs were incurred. For Bellin, achieving the Triple Aim for this population was imperative for keeping costs under control.
- **Portfolio of projects and investments to address the challenge:** These were health insurance benefit design, health care coaching, high participation in an annual health risk appraisal (HRA), supportive primary care, and population segmentation in order to redesign services for high-cost patients with complex needs. Bellin established a portfolio of Triple Aim projects with the overall goal of delivering services at scale to meet the needs of its own employees, and it also created an organizational learning system to support the work. Bellin tracked its progress on the Triple Aim and revised its work as needed by plotting data over time on the three dimensions of the Triple Aim: population health, experience of care, and per capita cost (Table 3).

| Triple Aim Dimension | Measure |
|----------------------|--|
| Population health | Health risk appraisal (HRA) scores based on biometrics: Average HRA score for employees and spouses Percentage of employees and spouses with a low (0-50) HRA score |
| Experience of care | Percentage of wellness certificates completed |
| Per capita cost | Percent increase in cost per employee plan per year (PEPY) |

Bellin measured improvements in population health by combining the population's biometric HRA scores into one summary measure on a scale from 0 to 100 (Figure 2). It also measured specific improvements in its highest-risk and most costly employees by using the same HRA and tried to lower the percentage of high-risk individuals (HRA score less than 50), as shown in Figure 3.





The percentage of wellness certificates that were completed, which Bellin used as a measure for experience of care, is shown in Figure 4. A wellness certificate is a form filled out by a primary health care provider's office that indicates whether an individual is up-to-date with wellness and prevention services and has completed an HRA.



Figure 5 shows Bellin's percent increase in cost per employee plan per year (PEPY). Although the increase averaged more than 10 percent from 2006 to 2009, it has averaged only 3 percent since 2010.



Expanding to Other Population Segments

Based on the success of this work with its own employee population, Bellin Health launched a successful new business line that provides these services to employers throughout the community. For those who engage Bellin at the highest level, Bellin's services include a consumer-driven health plan, HRA, on-site services, incentives for wellness, and prevention coverage. Bellin reduced total health care costs by 21 percent for other employers using its services.

Using these skills, Bellin expanded its work on the Triple Aim to include other enrolled populations, such as its Medicare population. Bellin Health is one of the Pioneer Accountable Care Organizations (ACOs), along with its partner, ThedaCare. Working with patients enrolled in its Medicare product, the Bellin-ThedaCare partnership was able to save \$389 per participant in the first year, for a total savings of \$7.6 million. In the second year it had a total savings of \$3.2 million, as well as reached the Pioneer ACOs' highest overall score for quality of care indicators.

In addition to its work supporting these enrolled populations, Bellin Health understands that it has a role to play in improving the health of the community and thus must partner with other organizations to address the broader determinants of health. For a number of years, Bellin Health has been working with the school systems on a project called "Thrive."²¹ More recently, together with many community partners, it has been working on a comprehensive plan to help children and young adults in their community that is connected to a larger national movement called "Strive."²² The coalition's plan is to create a comprehensive program from "cradle to career." It starts with a core of community engagement partners that make up the Community Leadership Council, which provides overall governance for the program. A small core team assists in the ongoing work and measurement of all the various age segment initiatives. Under the guidance of the Community Leadership Council, a working group oversees the age-segmented initiatives. The six age segments have eight goals, with a supporting team for each goal. Bellin Health is a good example of how to progress from improving health care to addressing the broader upstream determinants of health.

References

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Institute for Healthcare Improvement 20 University Road Cambridge, MA 02138 USA