

INSIDE STORY®

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Here's what we've discovered so far about the behaviour-change journey

Journeys take all forms; there's the long and winding road... there's the uphill battle... and of course, there's always the road not taken. So far we've discovered that the behaviour-change journey includes all of these and more. Behaviour change doesn't happen overnight—and as we're learning, neither does becoming a ChangeMaker. Fortunately, we've found that, like us, most plan sponsors and advisors are keen on making at least some incremental change in the health benefits world. To help along plan members' behaviour-change journey—and your journey to becoming a ChangeMaker—here's what we've learned so far...

First, let's review the impact of chronic conditions...

Nothing illustrates the importance of motivating behaviour change better than the impact of chronic conditions. Not only are chronic conditions negatively affecting plan member health, but they are also seriously affecting plan costs. And the incidence of chronic conditions is on the rise.

You may recall shuddering at the results of the GSC 2014 Health Study: plan members with high blood pressure and high cholesterol typically have three times the claims volume and three times the claims costs as plan members who don't have one of these conditions. And diabetes is even higher: in the 2014 study, plan members with diabetes have the highest volume of claims and the second-highest claim costs, behind only specialty-drug users. They have four times the claims volume and four times the claims costs versus non-diabetics.

- → At the plan level: From the GSC 2014 Health Study, drugs to treat chronic conditions represent 89.27% of drug costs for plan members in their 50s and 94.54% of drug costs for plan members in their 60s, the highest cost age-bands.
- → In the bigger picture: "Approximately half of all Canadians have a chronic condition and more than one in four Canadians have two or more chronic conditions."1

It's clear that we need to help support plan members in achieving better health. While personal choices are a factor, it's important to recognize that there are also bigger-picture forces at play. Social and environmental barriers to making healthier choices are everywhere: our increasingly sedentary jobs and our un-walkable neighbourhoods, limited support for active types of commuting, and the lack of substantial physical education in schools—not to mention the obvious evils like processed fast food in abundance. As a result, supporting even the most motivated plan member is anything but simple, let alone supporting the unmotivated. That's where behavioural economics provides important insight...

Remember behavioural economics?

All our talk about "nudging" plan members to make healthier choices is in keeping with behavioural economics principles. As we explained in the October 2014 edition of The Inside Story, behavioural economics combines economic theory with psychology to demonstrate that decision-making isn't as rational as we might like to think—in fact, it's not overly rational at all. However, our irrational actions are predictable—this means that it is possible to intervene to help plan members make healthier choices. And how better to do it than by leveraging technology...

Technology is where it's at

Technology paves the way for developing innovative ways to apply behavioural economics principles that will nudge plan members toward healthier behaviours. Not only does technology represent the ultimate in convenience, it's also immediate; technology enables everything to happen right now—from participating in programs and receiving feedback to receiving rewards. We humans like that.

First stop: Stick2lt

Nudge plan members to take their medications properly



Plan members with chronic conditions who are not adherent to their prescribed medications (or don't "sticktoit") risk getting sicker and developing complications or additional health problems, as well as reduced productivity or time away from work. In late 2013, we launched the Stick2lt program with the goal of offering supportive messages—and most important, customized medication reminders—to improve adherence to cholesterol and hypertension medications. Here's a rundown of what we discovered:

- → The program was well received by plan members who were starting a regime of cholesterol or hypertension drugs; hundreds signed up with a drop-out rate of only 10%.
- → More **women** signed up than men.
- → 99% of participants chose to sign up online rather than via phone even though the average participant's age was in their early 50s. In addition, the preferred method for the reminder messages was text, not phone or email—looks like even the middle-agers are hip to today's techie world.
- → Most common reason for non-adherence to medication was forgetfulness.

Overall, Stick2lt made a difference where it really counts. Compared to the control group of plan members taking similar medications but who did not receive reminders:

Stick2It Refresher

Here's how it worked:

Eligible plan members were invited to sign up for the free program directly on the Stick2lt website. Based on responses to an online survey, Stick2lt created a customized program for each plan member focused on providing medication reminders. Six months after enrolment, they completed another survey asking similar questions as when they enrolled. Based on their responses, Stick2lt fine-tuned the reminders and messages sent to each plan member.

- → 37.3% more Stick2It participants continued to take their medications throughout the study.
- → **49.5%** of Stick2lt participants were classified as "vigilant" in taking their medications during a refill interval (only **35.6%** of the control group members were classified as "vigilant").
- → 9% fewer Stick2It participants "dropped out" meaning that they no longer took their medications after the first refill.

The success of Stick2lt lead to a bigger step along the behaviour-change road as we integrated Stick2lt into our new program, and new technology, the Change4Life health portal.

Next Stop: Change4Life™

Nudge plan members to make healthy changes



In May 2015, we launched the Change4Life health portal—and who better to explain what we've learned so far than the mastermind behind the Change4Life scene himself, Peter Gove, our innovation leader for health management.

GSC: So Peter, although it's still early days, what would you say are lessons learned so far from the Change4Life portal?

PG: Well first off, we've had a great start, during the first four months, we already had over 12,000 plan members sign up. And over 50% of them completed Change4Life's Health Risk Assessment (HRA), which is an unheard of percentage; a more typical response rate is about 20%.

This is significant because based on a completed HRA, Change4Life can tailor an action plan specifically for the plan member. I think all our obsessing about every aspect of the HRA will pay off because, unlike most standard HRAs, the Change4Life version focuses mainly on modifiable risk factors rather than things that can't be changed, like family history. And the information captured in the HRAs represents a reservoir of useful data to help guide plan sponsors' future efforts. Of course individual participant data will always be kept confidential, but we will be able to provide plan sponsors with the aggregate HRA data starting next year.

GSC: Any other gems you can share with us?

PG: Another interesting result is related to the rewards aspect of Change4Life, which is based on the behavioural economic principle that people tend to focus on immediate costs and benefits, whereas they undervalue future costs and benefits. As a result, it can be motivating to receive an immediate "payoff" for a behaviour that usually wouldn't have a benefit right away.

So with Change4Life, plan members immediately receive points when they do certain healthy things. They use the points they earn to buy what are referred to as "ballots" that they can then use to bid for rewards. So we were hoping to see a lot of bids, and so far since the launch, there have been 34,000. We figure that plan members are getting the concept, and more important, they are working toward improving their health.

GSC: It's easy to see the appeal of points and rewards.

PG: Yes, and in terms of increasing its appeal, the incentives aspect of Change4Life also takes a page from video-game development that stresses the importance of constantly shaking things up. For Change4Life, this will mean things like new rewards and of course, ongoing upgrades and new content.

GSC: And what else does the future hold for the health portal?

PG: Ultimately, our goal is to fully integrate Change4Life into plan members' lives by going mobile. First we'll be adding Change4Life to GSC's app, "GSC on the Go^{TM} " and then we hope to integrate Change4Life with other mobile applications like fitness devices. Also we're working toward a place where plan sponsors will be able to set up their own campaigns like their own types of challenges with unique prizes.

Change4Life refresher Here's how it works:

management solution that provides plan members with interactive online tools and to live healthier lives. Plan members sign up for free through GSC's Online Services and then, through the Change4Life website,

- Complete an online Health Risk
- Receive Stick2It medication reminders
- Sign up to receive health reminder emails
- Read educational articles on health topics

And, as they complete these actions, used to participate in the Change4Life Rewards Program.

Here's what one happy winner (and behaviour changer) had to say:

Big thanks to GSC and the Change4Life program...it helps you to learn more about your health and well being AND...you get a chance to win very cool prizes at the same time I was lucky enough to win a \$250 Best Buy gift card!!! Woo! ""

GSC: Looks like there is a lot in the works... Anything else you can let us in on at this point in the journey?

PG: As you can imagine, as a GSC initiative, Change4Life has a huge analytic component. As I mentioned, the HRA alone provides the foundation for very useful aggregate reports, but basically, we're examining almost every aspect of Change4Life. For instance, we're researching what "type" of plan members are using it—whether it is mainly attracting healthy plan members that Change4Life can help keep healthy or is it attracting plan members struggling with certain health conditions... and if so, which health conditions? We're looking into what components they're using, how their behaviour is changing over time, and which rewards are motivating change. As participation increases over the rest of 2015, we'll be sharing our first insights from that data in 2016.

GSC: Speaking of participation, what's the best way to get more plan members to sign up?

PG: Before launching the Change4Life health portal, all of our research indicated that participation rates are closely linked to promotion by plan sponsors. And now that we have launched, this certainly appears to be the case, so plan sponsors really have an important part to play in encouraging plan members to sign up. The good thing is that we've developed lots of promotional materials to help plan sponsors spread the word... free posters, fact sheets, you name it. Plan sponsors can just let their account executive or service representative know they want some promotional materials, and we'll deliver them pronto.

GSC: Thanks Peter, we'll be back for updates... we know where to find you.

Keep putting one foot in front of the other

Our first leg of the behaviour-change journey with Stick2lt and Change4Life illustrates that—by working together—we can motivate behaviour change and curb the negative impact of chronic conditions on plan member health and on plan costs. Teamwork is key; we'll keep enhancing Change4Life with fresh content and exciting new rewards while you keep encouraging plan members to participate. As aspiring ChangeMakers, together we can help plan members reach a healthier destination—a journey well worth taking indeed.

Source:

¹"Self-management support for Canadians with chronic health conditions: A focus for primary health care," Health Council of Canada, May 2012. Retrieved September 2015: www.selfmanagementbc.ca/uploads/HCC_SelfManagementReport_FA.pdf

COMMUNITY GIVING PROGRAM

HERE'S HOW WE ADD TO THE GREATER GOOD ...



Paving the way for a brighter future Take a look at how our grant recipients are making a difference

Frontline care—like dental services, vision care, prescription drugs, disease management, and mental health supports—can act as a catalyst for change. That's why the GSC Community Giving Program is focused on supporting organizations and initiatives that provide frontline care for underinsured or uninsured populations. And all grant recipients include a navigator component—this means ongoing positive change as clients are referred to any additional services they may need.

Frontline care in action in Alberta



Calgary Dental Infection Program

The Calgary Dental Infection Program provides patients who have dental infections with a voucher for a free visit to the Public Health Dental Clinic. Patients receive the vouchers from staff at the antibiotic clinics at Calgary's four acute care hospitals. Typically patients with a dental infection who end up going to the hospital have a severe infection and receive intravenous antibiotics, but often the source of the infection is not addressed resulting in reinfection. Fortunately, after leaving the hospital, these patients can use the voucher for treatment at the Public Health Dental Clinic. Not only does the clinic resolve the issue that is causing the infection, but the patient also receives guidance regarding preventive dental care. In addition, acting as a navigator, the clinic guides patients toward ongoing dental care and, if needed, medical and social programs. GSC funding will enable the clinic to dedicate another day a week to providing dental services to voucher recipients. For more information, see www.albertahealthservices.ca/services.asp?pid=saf&rid=1040109

Inn from the Cold - New Journeys: Assessment and Triage

New Journeys: Assessment and Triage is a program offered at Inn from the Cold, which is an emergency shelter that provides support and programs for homeless families. Within 72 hours after arriving at the Inn, residents complete a comprehensive self-assessment where they provide information about their situation, family background, and any immediate risks. Based on the assessment, Inn staff is able to quickly take action regarding the needs of the resident. In addition, the assessment allows the Inn to act as a navigator by helping residents set goals and then connecting them to community resources that address all aspects of life, such as health care services, immigration services, addiction treatment programs, education, child care, mental health support, and job training. GSC funding will help the Inn continue with this comprehensive approach to helping guide those most vulnerable toward a better future. To learn more, visit the Inn's website at www.innfromthecold.org, Facebook: https://www.facebook.com/innfromthecold, Twitter https://twitter.com/innfromthecold/



MENTAL ILLNESS AWARENESS WEEK HOPES TO DECREASE STIGMA

Twenty per cent of Canadians will experience a mental illness during their lifetimes. It affects people of all ages, cultures, education, and income levels—potentially including many of your plan members. In fact, a recent Conference Board of Canada briefing indicates that the occurrence of mental health disorders in the workplace is more than 60%¹ higher than in the general Canadian population. In addition, mental health issues are common reasons for absences from work and can also have a negative impact due to presenteeism.

Although mental illness is prevalent, a strong societal stigma persists. As a result, many people don't end up getting the help they need. Fortunately, the goal of Mental Illness Awareness Week (MIAW)—an annual national public education campaign—is to increase awareness of the nature of mental illness and to help decrease its stigmatization. This year's MIAW is October 4-10, 2015, and the theme is Mental Health: Take Action NOW!

One of this year's MIAW's main initiatives is the Faces of Mental Illness campaign, which features the photos and stories of Canadians who have experienced mental illness. The week also includes a main event that will bring together a range of decision makers, members of the Canadian Alliance on Mental Illness and Mental Health, and members of Parliament to show support for mental health initiatives and discuss the need for increased access to mental health services. For more information about MIAW, visit www.camimh.ca/mental-illness-awareness-week/about-miaw/

NEW STUDIES ZERO IN ON BEHAVIOUR CHANGE

- → Technology for behaviour change continues to gain momentum: A recent study shows that there are now more than 165,000 apps available to help people stay healthy or monitor a medical condition; nearly a quarter of consumer apps are focused on disease and treatment management and two-thirds are to help improve fitness and wellness. Not only are health care apps abundant, they are no longer just a novelty but are increasingly a part of everyday life. Doctors and other health care professionals are also taking more of an interest in using apps to help their patients but have privacy concerns and would like to see more scientific evidence about the effectiveness of health care apps. For more information, visit the IMS Institute for Healthcare Informatics: www.imshealth.com/portal/site/imshealth/menuitem.c76283e8bf81e98f53c753c71ad8c22a/?vgnextoi d=49127721ef5df410VgnVCM1000000e2e2ca2RCRD&vgnextchannel=8c7de5fda6370410VgnVCM10000076192ca2RCRD&vgnextfmt=default
- → Behavioural economics principles in action: New research is being described as showing the most conclusive evidence to date that people consume more food or non-alcoholic drinks when offered larger-sized portions or when they use larger items of tableware. Put another way, larger-sized portions, packages, and tableware nudge people to eat and drink more. Although society tends to blame overeating on personal characteristics like lack of self-control, these findings point to the important role of environmental influences on eating. The study suggests that eliminating larger-sized portions across the whole diet could reduce average daily energy consumed from food by 22% to 29% among American adults and by 12% to 16% among adults in the U.K. For more information, visit the Cochrane Library at: http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD011045. pub2/abstract
- → Health tips via text are effective reminders: Researchers discovered that after receiving four texts a week for six months, patients had significantly lower cholesterol, blood pressure, and body mass index. Most participants reported finding the texts useful and many were also more likely to exercise regularly and become non-smokers. The results suggest that when information is targeted to someone's particular health concerns, text messages can have a very positive effect. Another benefit is that texting is a relatively low-cost approach. For more information, visit The George Institute website at: www.georgeinstitute.org/projects/text-messages-to-improve-medication-adherence-and-secondary-prevention-text-meds

Source

The Footprint of Mental Health Conditions, Healthy Brains at Work, The Conference Board of Canada, May 2015, Retrieved September 2015; http://www.conferenceboard.ca/e-library/abstract.aspx?did=7057

OUT & ABOUT... EVENTS NOT TO MISS

Workplace Benefit Awards - October 7

Arcadian Court, Toronto, Ontario www.benefitscanada.com/microsite/awards/workplace-benefits-awards

The Better Workplace Conference - October 14-16

Hilton Lac-Leamy, Gatineau, Québec

Come see GSC's Innovation Leader for Health Management, Peter Gove, talk about the future of health benefit plan design. www.conferenceboard.ca/conf/betterworkplace/agenda.aspx

CPBI Ontario - October 28-29

Hilton Hotel, Toronto, Ontario

www.cpbi-icra.ca/Events/Details/Ontario/2015/10-28-CPBI-Ontario-Regional-Conference-Healthy

Healthy Canada: Financial Models and Fiscal Incentives in Health and Health Care - December 1

David Willows participates in a panel discussing Canada's private sector experience with using rewards systems to motivate changes in behaviour including physical activity and healthy eating.

InterContinental Toronto Centre, Toronto, Ontario

www.conferenceboard.ca/conf/healthsummit/agenda.aspx

Face to Face Drug Plan Management Forum - December 2

The Fairmont Royal York, Toronto, Ontario www.benefitscanada.com/conferences/face-to-face-drug-plan-management-toronto

October Haiku Turn and face the change Said David Bowie long ago Wow, cool haiku eh?

Winner of the draw for an iPad mini

Congratulations to C.Bitz, of Calgary, Alberta, the winner of our monthly draw for an iPad mini. Through this contest, one name will be drawn each month from plan members who have registered for Plan Member Online Services for that month.



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Calgary	1.888.962.8533	Montréal	1.855.789.9214
Toronto	1.800.268.6613	Windsor	1.800.265.5615
London	1.800.265.4429	Vancouver	1.800.665.1494