

WHITE PAPER

Healthy doses of data and analytics reveal a clearer view of members and patients

In health care today, it's not just who you know, it's what you know about them. Identity matters, and identity intelligence is required to fully manage all the covered lives that are new to the health care system. Medical and demographic details about patients and members are the building blocks of identity intelligence, and ongoing access to updated data is critical to success in Pharmacy today.

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Pharmacy benefit managers (PBMs) and retail pharmacies need to know, first, *who* new patients and members are, and if they are in fact who they claim to be. That's basic identity management. But Pharmacy also needs to know *where* those patients and members are, and when and where they move as soon as possible. Pharmacy organizations also need access to data on patients' and members' health status, how they're managing their diseases and, importantly, whether they'll listen if someone suggests an alternative treatment. In addition, Pharmacy is interested in whether patients and members are motivated to improve their health at all, and if so, what motivates them to do so.

But that data is just noise without targeted analytics to make sense of it, coupled with a single, integrated approach to managing patient and member identity. As Pharmacy's central role in health care becomes clearer, pharmacy organizations must integrate new patients and members, minimize exposure to identity-related risks and improve health outcomes by managing compliance. To do so, Pharmacy must strive for identity intelligence by leveraging data from traditional and brand-new sources and turning that data into actionable information with precision analytics to fulfill its central role and accomplish its outcomes-related goals.

Structural change offers opportunities

This is an era of the kind of chaos-creating structural change in health care that propels some organizations to the top—the ones that manage the challenges and turn them to their advantage—and sends others scrambling for solutions. The pace of pharmaceutical discovery keeps increasing, and there are more drugs available to treat more conditions than ever before. In addition, the consumer market for pharmaceuticals continues to grow; the more people who have health insurance, the more who will have affordable access to prescription medication.

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But medication is only part of the picture today. Today, more services are provided at retail pharmacies, and those services have a greater impact than ever on overall health. A recent feature on the consumerreports.org lists customized daily medication packaging, wellness programs, 24-hour live chat programs, a wider range of injections, onsite clinics and self-tracking kiosks for blood pressure, weight and body mass index.¹ As pm260online.com recently noted, “Today’s pharmacies are offering expanded health care services and are ideal locations to raise disease

awareness and deliver educational information. They are becoming destinations for consumers seeking health care solutions.”²

Managing privacy and access to information

There exists great opportunity for Pharmacy as it pivots to a stronger position as a health care services provider and increases its clinical role, but only if PBMs and retail pharmacies can keep track of all the newly covered lives and verify their identity each time they access the health care system in general, and pharmacy organizations in particular. That’s especially critical in light of the fact that a large portion of the newly covered are in lower-income populations, including Medicaid, and those populations are often especially hard to reach and communicate with. Indeed, more patients means more administrative headaches, as Pharmacy endeavors to keep tabs on the contact information and whereabouts of all those new members, many of whom may not have any history with an individual retail pharmacy or a PBM.

Privacy issues loom larger than ever, meaning privacy management must be an ever-more-important element of pharmacy organizations’ data management processes and overall identity management operations. The Pharmacy sector must reach new and existing members and patients and manage their medications without revealing inappropriate information to outside sources; that’s especially challenging when enrolling patients and members in programs like patient portals that face strict rules for using Personal Health Information (PHI) under the Health Insurance Portability and Accountability Act (HIPAA). Recent data indicates that medical identity theft is the fastest-growing type of identity theft, at 22% annually, and that 64% of patients cite privacy issues as a key concern when accessing health information online. The numbers also reveal that 21% of patients withhold information from doctors out of concerns over data security; maybe that’s because medical identity theft victims pay an average of \$13,500 to resolve the situation.³

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The penalties for inappropriate use of patient information, whether that’s simply misidentifying and thus miscommunicating with a plan member or outright illegal use of PHI, are increasing in number and in severity. Constantly refreshed identity data provides the solution: It helps pharmacy organizations instantaneously validate members’ and patients’ identity to ensure their privacy and protect the retail pharmacy or PBM from the fallout from privacy-related missteps.

Mobility makes identity management more difficult

The mandate to protect patient and member privacy is complicated by the fact that members move, and marry, and do things like sign some documents “John Q. Public” and others “J.Q. Public.” Knowing where all those new patients and members are allows pharmacy organizations to keep track of patient populations and saves money and time on correspondence campaigns. Returned mail drags down operations and wastes valuable resources, including charges from the U.S. Postal Service, so smart retail pharmacies and PBMs use carefully managed member demographic data to better communicate with them.

That helps in another key area, too. Right now, a huge majority of health care organizations still rely on direct mail campaigns to improve adherence, which is a potential problem with patients or members who are hard to track down.⁴ Easy access to well-managed and maintained demographic information on patients and members makes patient engagement more effective, and that’s the key to driving better medication adherence.

Without adherence, even the best care management efforts fail

It’s a fact that more patients do not, on their own, mean more compliant patients; rather, they generally mean more effort must be put into ensuring patient engagement, by determining the population members who need help, weighing their motivation to change, and then providing them with the tools they need to do so. Research by the American Society on Aging (ASA) and the American Society of Consultant Pharmacists Foundation (ASCPF) reveals that “low literacy, lack of health insurance coverage, poor social support, family instability and homelessness” are the most consistently listed reasons for non-adherence.⁵ Home delivery helps, upping adherence by almost 20%, but you have to know where patients and members live before you can ensure their meds arrive on time—or at all.

The stakes are simply too high not to make adherence a priority. It’s a key factor in certification from the Electronic Healthcare Network Accreditation Commission (EHNAC) which pharmacy organizations often seek⁶; Healthcare Effectiveness Data and Information Set (HEDIS) measures and the

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Medicare Star Rating System also consider medication adherence rates. Recent data points out that up to 30% of prescriptions are never filled, wasting a dollar out of every nine spent on health care⁷; in addition, more than half of people missed a dose in a 12-month survey period and 30% couldn't remember if they did or didn't take their medication.⁸

Traditional data must be enhanced with new sources

There are interventions that can help members understand and access their meds, and provide support and education specific to their conditions, but too few pharmacy organizations have the socioeconomic data needed to fill in the profile gaps and determine the appropriate intervention strategy. Maximizing potential while minimizing risk requires data—lots of it—and not all of it from traditional sources. Knowing what meds patients are taking and whether they'll respond to efforts to improve their compliance allows Pharmacy to target its efforts at medication adherence, but prescription history alone often is insufficient. Carefully selected socioeconomic data that's been turned into information with precisely focused analytics can help pharmacy organizations better engage with patients to encourage compliance and improve health outcomes.

Incorporating such diverse sources of publicly available data as marriage and divorce records, bankruptcy declarations and military service can paint a clear picture of otherwise unforeseen health and compliance risks, as can credit reports, property and motor vehicle registrations and criminal records. Additional pertinent data can include address changes, members' financial assets and education level. That kind of information can also reveal collusion, fraud and drug socialization patterns among providers, patients and members and Pharmacy facilities, but only when predictive analytics show where that activity is most likely and what the possible results include.

Pharmacy is starting to catch on to that. In a recent study, not even 10% of health plans were using analytics to identify the need for adherence-related interventions, but well over half said they planned to in the future. That could be a factor in that just 67% view their medication adherence efforts as “moderately effective.”⁹ Without a predictive element to those efforts, Pharmacy is left to hope that adherence improvement resources aren't being wasted on patients who won't comply or who may not ever receive potentially misdirected messaging.

The tools that retail pharmacies and PBMs need

The LexisNexis® Health Care Identity Intelligence Suite features patient- and member-focused tools for better validation, communications and engagement. It's built on vast stores of data, from close to 10,000 different sources of clinical and socioeconomic and proprietary and public data, and proprietary predictive analytics tools designed to solve exactly the types of problems Pharmacy faces as organizations endeavor to take advantages of the opportunities market changes are creating.

- *Identity Management* leverages a systematic approach to maintaining, enhancing and augmenting member and patient identity profiles with current, correct and previously unavailable information. The main product is MemberPoint®.
- *Identity Checks* facilitate the authentication, verification and resolution of identities engaging with an organization; helping to identify possible fraud risks and allow for point-of-need identity information searches. That's accomplished with LexID®, Instant Authenticate, Instant Verify, Bridger Insight® XG and Accurint® for Health Care.
- *Identity Insights* helps customers better understand individuals and their relationships so they can positively impact patient engagement and prevent drug misuse and abuse by leveraging unique socioeconomic factors and analytics. Specific components include Socioeconomic Health Attributes, Socioeconomic Health Score and Relationship Mapping.

Challenges present opportunities

The environment that retail pharmacies and PBMs operate in will only get more complicated; at the same time, opportunities for Pharmacy to participate in patients' health will continue to increase. Pharmacy organizations should act now to gain access to the data and analytics they'll need to protect privacy, prevent fraud, ensure messaging makes it to the intended recipients, up patient engagement and boost medication adherence. It's a matter of survival and an opportunity to excel, and all it takes is the right partner to make it happen.

Sources:

- ¹ <http://www.consumerreports.org/cro/2014/08/new-pharmacy-services/index.htm>
- ² <https://www.pm360online.com/the-pharmacys-new-role-in-providing-healthcare-services/>
- ³ <http://www.experian.com/healthcare/patient-portal-security-authentication-id-proofing.html>
- ⁴ <http://aishealth.com/archive/ndbn082214-04>
- ⁵ www.adultmeducation.com/SocialandEconomicFactors.html
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- ⁷ <https://lab.express-scripts.com/~media/pdfs/express%20scripts%20adherence%20white%20paper.ashx>
- ⁸ http://www.ncpa.co/adherence/AdherenceReportCard_Full.pdf
- ⁹ <http://allazohealth.com/mco-adherence-study>

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Our health care solutions combine proprietary analytics, science and technology with the industry's leading sources of provider, member, claims and public records information to improve cost savings, health outcomes, data quality, compliance and exposure to fraud, waste and abuse.

LexisNexis Identity Intelligence Suite is not provided by "consumer reporting agencies," as that term is defined in the federal Fair Credit Reporting Act (15 U.S.C. §1681, et seq.) (FCRA) and does not constitute a "consumer report," as that term is defined in the FCRA. Accordingly, LexisNexis Identity Intelligence Suite may not be used in whole or in part as a factor in determining eligibility for credit, insurance, employment or another purpose in connection with which a consumer report may be used under the FCRA. Due to the nature and origin of public record information, the public records and commercially available data sources used in reports may contain errors. LexisNexis and the Knowledge Burst logo are registered trademarks of Reed Elsevier Properties Inc., used under license. Copyright © 2016 LexisNexis. All rights reserved. NXR11437-00-0616-EN-US