



## A breakthrough clinical study demonstrates that member-directed clinical alerts improve compliance with Care Considerations.

Members more likely to receive care according to evidence-based standards.

### OVERVIEW

ActiveHealth Management's clinical decision support technology, CareEngine® System, works by continuously gathering member data and comparing it against the latest findings in the evidence-based literature. When gaps in care, medical errors or quality issues are identified, clinical alerts, called Care Considerations (CCs), are issued. Care Considerations typically suggest stopping a potentially dangerous medication, adding a medication, or conducting a test. Care Considerations were initially only sent to physicians (physician messaging). In 2006, ActiveHealth started communicating Care Considerations to members (member messaging).

**A recent study found that objective compliance with ActiveHealth's Care Considerations increased by 12.7% when sent to both physicians and members, compared to when alerts are sent to physicians alone.**

### BACKGROUND

Numerous studies have documented the slow dissemination of new medical knowledge and the failure of many patients to receive important evidence-based clinical services. Clinical alerts can accelerate the dissemination of new clinical knowledge and increase the use of evidence-based services. Compliance with evidence-based clinical alerts requires action by both physicians and patients. Some of the factors affecting compliance include:

#### Physician-related factors:

- Physicians are very busy, and are inundated with messages from health plans and vendors
- Messages from many sources are unreliable – so messages from all sources may be ignored

#### Patient-related factors:

- Patients may not understand the importance of the recommendations
- Patients may forget the recommendations

**“ It has been our belief that sending clinical alerts to members would increase compliance, thereby enhancing patient safety and accelerating the application of evidence-based standards of care. When the first large group of clients rolled out the member messaging program, we grasped the opportunity to conduct a controlled study of the impact of sending alerts to members. ”**

**Greg Steinberg, MD**  
Chief Medical Officer, ActiveHealth Management



## METHODOLOGY

The study compared overall change in compliance with Care Considerations in two large groups of members - a Control Group that received only physician messaging during the study, and a Study Group that received both physician and member messaging during the study. The study compared compliance in 2005 (before member messaging) and 2006 (when member messaging was added for the Study Group). Compliance was measured objectively by looking at claims data within pre-defined time windows after issuing a Care Consideration. For example, for Care Considerations suggesting the addition of a medication, compliance was reported as positive only if that medication appeared in the medication claims data after the Care Consideration was sent.

Year	Study Group Membership	Study Group Compliance	Control Group Membership	Control Group Compliance
Baseline (2005)	110,120	29.0%	775,191	30.0%
Study (2006)	167,120	31.0%	836,322	28.9%

## RESULTS

### OVERALL INCREASE:

Controlling for age, sex and Care Consideration type, the addition of member messaging increased compliance by 12.7%.

### Study Group Results:

Care Consideration compliance increased from 29.0% to 31.0%.

### Control Group Results:

Care Consideration compliance decreased from 30.0% to 28.9%.

“ The increased compliance we noticed from adding member messaging may be attributed to two possible scenarios. First, the alerts are serving as a reminder to patients of instructions already given to them by their physicians, making it more likely that they fill prescriptions or go for recommended tests. It is also possible that the alerts members receive are independently prompting the patients to discuss specific clinical issues with their physicians. A fairly safe bet would be that – to some extent – both processes are taking place. ”

Stephen Rosenberg, MD, MPH  
SVP, Outcomes Research, ActiveHealth Management

## CONCLUSION

Adding member messaging to physician messaging improves compliance with clinical alerts. Members are more likely to receive care according to evidence-based medical guidelines.



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