

# Closing Gaps in Care

## Multi-channel Outreach: Closing Gaps in Diabetes Care

### Key Results



48%

of all gaps in care closed



4,768

reached for screenings



2

year multi-channel campaign

### Overview

A large national client and Welltok/Silverlink executed a targeted set of multi-channel programs to encourage effective care for commercial members with diabetes as part of a two-year campaign to close gaps in diabetes care. The programs continue work that had begun in prior years to communicate high-impact educational messages to encourage members to work with their providers to close clinical gaps. Message content, channel selection, timing, and sequence were tailored for each person based on a multi-dimensional segmentation scheme.

Depending on their segment, gender, and current status on specific gaps in care, members could have received automated outbound calls, live agent calls, and/or mailings or some combination of these outreaches. There were four waves of automated calls. All of these calls had follow up mailings for selected members. Some members received live agent calls during the third outreach in addition to automated calls. Member phone numbers identified as wireless were re-directed to receive a live agent call or mail for second, third and fourth waves of outreach.

The campaign was designed to provide a tailored communication outreach strategy and personalized messaging to recipients based on gender; the segment they've been assigned to; and any prior health information on file with client. The five core segments included: Achievers; Strivers; Part-Way There; Distracted; and Disengaged. Members were assigned to different segments for each health action. There were over 30 segments across all health actions, some of which are gender-specific.

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The campaign consisted of four distinct outreach programs: Eye Exam, Blood Work, Nephropathy, and Multi-Gaps in Care. Outreach occurred over the course of each calendar year, beginning in the spring (March through May) and ending in the fall (October through November), including approximately 4-8 weeks between outreaches.

The health actions (eye exam, blood work, and nephropathy) were prioritized based on rules developed as a result of the behavioral analysis, and members received tailored messaging addressing their individual gaps-in-care.

## Results and Insights

Based on claims details provided by the client, early results indicated that 48% of all gaps had been closed. Additionally, it was validated that those segments predicted more likely to complete a health action did so at a higher rate. While campaign reach rates varied by segment, those least likely to close gaps segments actually performed well.

In addition to actionable results, key insights into the program were gathered to help inform future communications and care management. For example, the nephropathy automated call program demonstrated that despite differences in authentication and completion rates, intention to schedule a screening among responding members was very similarly distributed by segment (see chart below). This insight speaks to the strengths of the segmented messaging approach in nudging very different members toward getting screenings.

## Intent to Schedule Screenings

