

Consumerism with IDEO

At the last Medical Directors meeting, the group spoke of innovating to provide member service not as a recovery mode, but to delight and engage patients. ACHP contracted with the consulting firm [IDEO](#) to offer a workshop focused on developing tools, mindsets and behaviors needed to become more innovative, agile and customer-centric in the delivery of coverage and care.

IDEO is founded on the concept of human-centered design and the belief that innovation is a product of empathy. In that regard, research design begins by expanding perspective, getting informed and inspired by the world, and observing and talking to people to learn more about what they need. People are not often able to communicate all of their values and concerns, but those elements can be uncovered through a personal connection, extended dialogue and by viewing people in their natural context. To trigger dynamic conversations, the IDEO strategy is not to follow a script, but rather to genuinely connect with the individual and follow through on interesting points with statements such as “tell me more about that.” To practice this, attendees [interviewed](#) members from HealthPartners and UCare about their experiences with their health care.

The second part of the workshop focused on the design process. Using the information from their interviews, groups were instructed to design an innovative product for their health plan sequentially following the IDEO process to research, synthesize, ideate, prototype and test. As part of this process, IDEO distributed a [worksheet](#) and a [series of questions](#) to guide development. Participants were encouraged to defer judgment about other people’s ideas, have a rapid exchange of ideas, build on their colleague’s ideas, focus on a specific topic, have one conversation at a time, use visual aids and aim for a quantity of ideas when brainstorming. Meeting attendees were grouped with others from their plan, and they designed a prototype to be potentially implemented at their own organization.

Take-Backs and Next Steps

- The team from Fallon Health commented that their interviewee was confused about the billing process, and as a small experiment for reforming this process, Fallon could use its own employees to test its ideas. The concept would be have the plan front the claims money owed to the provider group and then personally seek out members to pay the bill.
- The team from Martin’s Point spoke of their ongoing work to develop a group visit model for diabetes, and one idea they developed during the IDEO session was to define a member segment by those who need transportation assistance and providing them with a group van en route to their group visit sessions.
- Drs. Foels and LaBine spoke about enhancing physician transparency to measure not just MD efficiency and effectiveness, but also communication between physicians. They suggested creating an online rating system for comments which would only be shared between primary and specialty disciplines to help improve communication.
- Dr. Mark Huth of GHC-SCW proposed using a videographer to elicit stories from members that are part of GHC-SCW’s member advisory council, and then share those videos as part of a forum on improving the care experience for their membership.