



**Marathon**  
Health™

# Adding Social into Medical

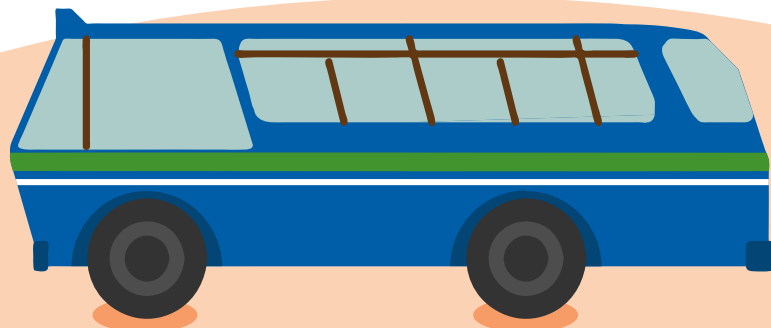
How a Worksite Health  
Center Can Provide  
Socially Informed Care

## Socially informed healthcare: How health should be

Health is more than a collection of genetic and behavioral factors. While healthcare providers are positioned to solve medical problems, long-term health outcomes are heavily dependent on the social, economic, and environmental context of a patient's life.<sup>i</sup> "Studies show a link between these factors and the risk for chronic conditions like asthma, heart disease, diabetes, and depression."<sup>iii</sup> In other words, health is strongly influenced by what happens *outside* of the doctor's office.

Because lifestyle factors such as lack of reliable transportation, financial resources strain, and insufficient housing are barriers to accessing health services and to health improvement, medical providers and patients can benefit from screening for and addressing these needs in the healthcare setting. Although clinicians may not play the role of social workers and solve their patient's unmet social needs, they *can* close the gap between their recommendations and the reality of a patient's life. We define this as **socially informed healthcare**.

This paper describes how Marathon Health providers are increasingly practicing socially informed healthcare, using a **social lens** to enhance the care we provide. We discuss how worksite health centers are an ideal setting for providing this holistic approach to patient care.



# Worksite healthcare: a natural fit for socially informed healthcare

Access to quality primary and preventative healthcare remains a critical component of any population health improvement strategy. As of 2019, **38% or more large employers have taken an activist role** in addressing health care access, quality, and cost by providing onsite or near site health centers to their employee populations.<sup>iv</sup> Employer-sponsored worksite clinics provide regular, convenient access to care for employees in diverse industries and geographies.

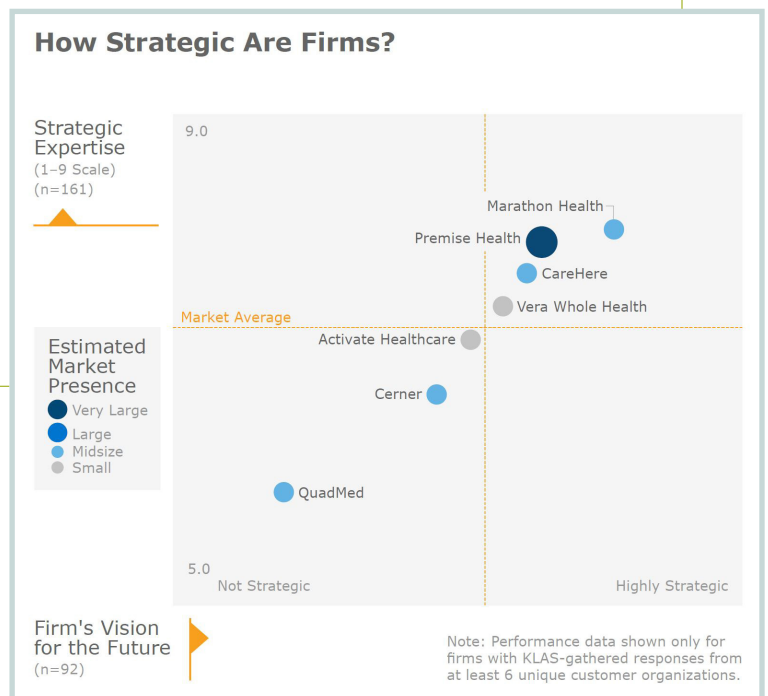
As a pioneer in this delivery model for more than 15 years, Marathon Health goes well beyond making primary and preventative care more accessible and convenient. Our foundation is the **relationship between provider and patient**, using methods such as **appreciative inquiry** to engage patients in the physical, emotional, and environmental factors that define their health. Our relationship-based approach is supported by **proprietary electronic medical record (EMR) resources** that naturally elicit conversation, goals, coaching, and treatment to meet patients in the context of their own lives. By incorporating **psychographic and demographic data at the local level through community health assessments**, we build a picture of the unique profile of the patient population to support the customization of services and support. Our providers then bring that awareness to the patient-provider encounter, applying their knowledge of available benefits, network, and community resources to provide **patient advocacy and navigation** across the entire spectrum of available services, thereby defining pathways to better health for patients.

Socially informed healthcare begins with access provided by forward thinking employers who are investing in primary care resources to deliver holistic care featuring unique population data tools, patient advocacy, and health outcomes reporting.

## “Marathon Health Seen as Most Strategic in Envisioning Future of Employee Health

Marathon Health clients appreciate the firm’s strategic help, such as their willingness to stay on top of the newest technology and offer a holistic approach to employee wellness. They note that Marathon Health considers factors other firms do not, such as social and economic determinants of health.”

– KLAS Research’s Worksite Health Services 2019 Performance Report



## Partnering with employers to address social needs

Among Marathon Health's customers across the nation are organizations with admirable commitment to improving the lives and communities of their employees.

“As pillars within their communities, our customers feel a **sense of social responsibility**. They've approached worksite healthcare as a tool to provide health and wellness at the workplace, which in turn supports health and wellness in the home and in the community.”

– Michael H. Huang, M.D., National Medical Director at Marathon Health

Their commitment is illustrated by onsite healthcare offerings, and often extends to other creative programs to support employees in meeting life's challenges.

## Case study

### A Colorado county gains population health insights by identifying social needs

A Colorado county took a more systematic approach to identifying unmet social needs in its employee population. This customer began by reviewing Marathon Health's community health landscape report, which summarized factors from County Health Rankings & Roadmaps and other accessible community health data that would be **reflected in the county's employee population**. To further validate the prevalence of social risks among county employees, Marathon Health administered a simple, nine-question social needs survey based on the *Health Leads* screening toolkit.<sup>9</sup>

The anonymous survey was statistically significant and identified three challenges as most prevalent in the employee population: difficulty understanding health, difficulty affording healthcare, and feelings of social isolation.

With these insights, the county **identified strategic investments and ways to align employee resources to improve population health and wellbeing**. A key strategy was the immediate addition of a licensed behavioral health counselor to its Marathon Health

worksite health center. Additional modifications included lengthening appointment time to explain health conditions and treatment plans, the use of Healthcare Blue Book by Marathon Health center staff, and integrating wellness incentives and group health education classes.

For the future, the county is looking to address other identified social challenges. Efforts include a proposal to build a community child care center with local partners to help close the gap in affordable and accessible child care options for employees. Additionally, county administrators recognize there is a local shortage of affordable housing, so representatives are advocating for sustainable housing options and improved local zoning regulations that would allow for more affordable homes to be built. Further, the county is exploring a down payment assistance program for qualified employees who do not earn enough to afford the high cost of housing in the area. These are just a few examples of how a customer can utilize population health insights to **address social needs and increase the overall wellbeing of its workforce**.

## Social needs and the patient-provider relationship

While population-level data about social needs and health risks can be instructive at the program level, they must be assessed and verified at the individual level to be useful in the healthcare setting.

Organizations such as the American Academy of Family Physicians (AAFP) have developed recommendations for incorporating screening tools for the social determinants of health (SDH). These screening tools include validated questionnaires that assess five core health-related social needs, which include **housing, food, transportation, utilities, and personal safety**, as well as the additional needs of employment, education, child care, and financial strain.<sup>vi</sup>

Foundational to practicing socially informed healthcare is a population health intelligence engine that goes beyond the traditional practice management systems designed for fee-for-service reimbursed medicine. Marathon Health's EMR, is part of our Health Engagement System™ that includes our EMR, personal health record (PHR), eHealth Portal, and mobile app. The technology requirements of an employer-sponsored health center differ from those of a fee-for-service ambulatory practice. In a traditional physicians' office, the EMR typically offers care documentation and financial management functionality such as pre-visit financial clearance, charge creation, claims adjudication, AR management, and audit functions. These differ from the core technology goals of supporting the **patient-provider encounter, capturing actionable data, and deriving analytics that address the Triple Aim objectives** of clinical outcomes, patient satisfaction, and lower costs. The Marathon Health EMR is designed around these goals and rich in functionality around patient engagement, population health management, and connected health.

Leveraging our core competencies and proprietary technology platform, Marathon Health has taken the industry lead to incorporate socially informed screening questions in our annual health risk assessments, which guide conversations with patients during Comprehensive Health Reviews. Social needs are verified and documented, and clinicians tap into customized in-network resources to make connections with local health departments, community health resources, and social service agencies. Socially informed healthcare means working with the patient to develop an action plan that addresses their social needs in addition to their health treatment plan. **Corresponding "interventions," such as a referral to a community resource, are documented in the same mode as clinical referrals**, including automated tasking features to ensure follow up and continuity.





Unlike traditional provider practices – and certainly retail or urgent care settings – worksite health centers are able to offer longer appointment times with extended patient-provider face time. Marathon Health has gone a step even further in this by addressing SDH, a capacity that has been built into every provider workflow, health coaching visit, and patient encounter, thus allowing social needs to be a core piece of every visit to the health center.

**Comprehensive patient navigation takes time, understanding, and knowledge of resources.** Working outside the reimbursement and fee-for-service model, our providers are able to engage in discussions with the patient about their health and wellbeing in the larger context of their life, often uncovering root causes to health issues that may be both clinical and social in nature. We apply time, understanding, and knowledge of resources to achieve measurably positive health outcomes and cost savings.

Our clinicians can provide support through patient navigation in many ways, including:

- Facilitating care coordination and referrals, ensuring patient follow through via appointment confirmation, completion of any encounters, and consultation reports from all referred providers.
- Utilizing price transparency tools to reduce overall healthcare costs for patients and make value-based decisions for follow up care.
- Promoting close collaboration with the customer's benefit team to identify high quality providers in their local network.
- Providing in-depth research on medications and advice on pharmaceutical utilization to find equivalents for better value or coupons, particularly for patients with financial constraints.
- Enhancing the quality of medical care that patients with chronic condition(s) experience both at the Marathon Health center and within the local healthcare community.
- Addressing social determinants of health issues that may be impacting patients.
- Connecting patients to other resources (e.g. support groups, chronic condition management programs, exercise groups, financial or stress management, EAP).

## Case study

### Providing patient advocacy to address a patient's social needs impacting health

A 62-year old female patient visited the worksite health center for a follow-up blood pressure and medication refill. The Marathon Health provider noted that the patient was currently doing well on her prescribed medications and had no specific complaints. However, the patient's blood pressure at the center that day was elevated. The provider opened a conversation about how things are going in the patient's life and what might be contributing to the elevated blood pressure reading.

In the course of discussion, **the patient described recent and ongoing stress due to the roof of her home having partially collapsed and she had no heat.** After reporting the issue to her landlord, the city condemned the building, leaving her with one week to find new housing.

The Marathon Health provider was able to assist the patient in contacting the local United Way chapter to help find alternative housing she could afford, and then connected her with her Employee Assistance Program (EAP) to speak with a lawyer about her legal rights. The provider then scheduled a follow-up appointment with the patient, whose blood pressure, two weeks later, had returned to normal.

Instead of simply providing a refill for the patient's blood pressure medication – or even increasing the dosage based on blood pressure readings – **this healthcare encounter addressed and resolved the underlying cause of the condition.** Socially informed healthcare made the difference for this patient.



## Humanizing healthcare and workplaces at the same time

Marathon Health is committed to meeting patients where they are with quality, personalized care that achieves better health outcomes and reduces health spend for employers and employees. This has driven our recent initiative to intentionally weave social needs assessments and documentation into our practice model, to identify valued resources, and to support our clinicians' ability to practice patient advocacy and navigation. In short, we are *humanizing* healthcare.

KLAS Research's "Worksite Health Services 2019 Performance Report," quotes Marathon Health as "highly strategic" for considering a "holistic approach to wellness...and factors other firms do not, such as social and economic determinants of health" that impact employees' health.<sup>vii</sup> Customers say that Marathon Health has helped them "look at health overall." With a focus beyond just the physical manifestations of health, many customer HR departments have begun implementing additional well-being programs that "may be able to help our employees as related to their social determinants of health."<sup>viii</sup>



In a complementary way, many of the employers we work with are re-examining their workplace benefits and practices through a humanizing lens. Employees are not machines, and high performance and productivity cannot be programmed. The lines between *work* and *life* are not definitive. **A healthy, productive work environment is created when employees can show up "authentically human" and be supported in a holistic way.**

Together, Marathon Health and human resource managers who want to make an impactful investment in their employees are achieving results with holistic healthcare provided at or near the worksite. At Marathon Health, **we will continue to expand our toolkit for removing barriers to better health** – whether medical, economic, or environmental – and helping individuals thrive at work and in life.



## Learn more

To learn more about addressing social needs and SDH at your worksite health center, please contact Michelle Rosowsky, VP Business Performance & Strategy, [mrosowsky@marathon-health.com](mailto:mrosowsky@marathon-health.com)



## References

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<sup>ii</sup> County Health Rankings & Roadmaps. "What and why we rank." County Health Rankings | County Health Rankings & Roadmaps Robert Wood Johnson Foundation. 2018. <http://www.countyhealthrankings.org/what-is-health>.

<sup>iii</sup> Moody's Analytics. "The Health of America Report: Understanding health conditions across the U.S." | BlueCross BlueShield Association. Dec. 14, 2017. [https://www.bcbs.com/sites/default/files/file-attachments/health-of-america-report/BCBS.HealthOfAmericaReport.Moodys\\_02.pdf](https://www.bcbs.com/sites/default/files/file-attachments/health-of-america-report/BCBS.HealthOfAmericaReport.Moodys_02.pdf).

<sup>iv</sup> PwC. "Medical cost trend: Behind the Numbers 2020" (17) | PwC, June 2019, <https://www.pwc.com/us/en/industries/health-industries/library/behind-the-numbers.html>.

<sup>v</sup> Health Leads. Social Needs Screening Tool | Health Leads, 2018, <https://healthleadsusa.org/resources/the-health-leads-screening-toolkit/>.

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<sup>vii</sup> KLAS Research. Worksite Health Services 2019 Performance Report (7) | KLAS Research, November 2019.

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<sup>ix</sup> Keswin, Erica. Bring Your Human to Work: 10 Surefire Ways to Design a Workplace That's Good for People, Great for Business, and Just Might Change the World. McGraw-Hill Education, 2019.

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