

Community Stories



SEPTEMBER 2014 | VOLUME 4



A New Beginning

A homeless man suffering from diabetes, cardiac disease and asthma was beyond our reach for five years. Through our Complex Targeted Care Management program, we finally connected with him – face to face – and it made all the difference.

Dwayne enrolled in UnitedHealthcare Community Plan of Wisconsin in 2009. He suffered from a long list of chronic health conditions: cardiac disease, hypertension, diabetes, hepatitis, asthma and knee injuries. Though he could have benefited from our preventive education and care management services, our care managers were never able to reach him.

That changed when Dwayne began making repeated visits to the ER, seeking relief for chronic knee pain. Thanks to our Emergency Department Education

Program (EDEP), ER staff knew to contact our health plan. They notified us of Dwayne's high utilization of ER services and provided his current contact information. After five years, we could finally reach out to this member in need.

Turned out of homeless shelters

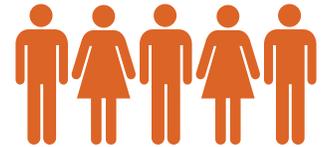
Many Medicare and Medicaid beneficiaries experience barriers to care, but Dwayne had more than his share. He lacked a primary care physician, wasn't taking his medications properly and frequently was homeless. And because he abused the pain medications prescribed for his knee pain, Dwayne had been turned out of several homeless shelters, making him difficult to reach.

Dwayne's vulnerability and multiple health risks made him an excellent candidate for our Complex Targeted Care Management (CTCM) program. Kelly, CTCM care

continued on page 4

23,236

THE NUMBER OF
HOMELESS PEOPLE
IN WISCONSIN
IN 2012.¹



AFTER FIVE YEARS,
WE COULD FINALLY
REACH OUT TO
THIS MEMBER IN NEED.

PEOPLE WHO ARE HOMELESS
DIE AN AVERAGE OF

30
YEARS EARLIER²

PARTNERSHIP STORY

EBT Farmers Markets

With fresh, affordable produce as close as their local farmers market, members can take important steps toward improving their health.



Balanced nutrition is a building block for good health and well-being, and it's especially important for growing children. The United States Department of Agriculture (USDA) recommends children consume one to two cups of fruit and one to three cups of vegetables each day.³

Unfortunately, one in nine Wisconsin households faces food insecurity.⁴ That means more than 273,000 children in Wisconsin do not have access to the nutrition they need, a deficit that can lead to lifelong health and developmental problems.^{5,6}

Partnering with local farmers markets

To help Wisconsin members live healthier lives, our health plan began partnering with local Wisconsin farmers markets in 2012. The EBT Farmers Market program provides Medicaid beneficiaries with access to affordable produce using Electronic Benefit Transfer (EBT) services.

"We love this initiative because we're passionate about helping members eat healthy," said Daphne Jackson, marketing manager for the health plan's community and provider engagement team. "And we know that making fresh, low-cost produce available locally is helping to tackle childhood obesity and reduce food insecurity for our members."

How it works

At participating farmers markets, people can visit the information booth where they swipe their QUEST/FoodShare card and purchase tokens. These tokens are then used like cash at the booths that display an EBT poster. The tokens can be redeemed for fruits, vegetables and other nutritious foods.

Members can also visit UnitedHealthcare booths at the markets. Our community engagement specialists staff the booths and offer nutritional presentations, as well as information on our *Food for Thought* program, which teaches children about healthy eating habits.

Growing participation

Since the program began in 2012, EBT usage has increased by more than 300 percent at participating markets. In addition, 95 percent of members who participated in the farmers market EBT program said that the ability to use their QUEST card has increased the amount of fruits and vegetables they consume.

Its popularity is proving that a well-run EBT program can benefit QUEST/FoodShare participants, as well as local farmers and the community at large.

Now we are working to extend the program benefits by increasing the number of participating markets. As we reach out to new farmers markets across Wisconsin, we explain the benefits of EBT programs and provide informational materials. We also offer a mentor program to assist first-time EBT users.

Many Wisconsin health plan members have chronic health conditions, such as diabetes and heart disease, which are aggravated by poor nutrition. The EBT Farmers Market program is working to transform their eating habits — one zucchini, tomato and green bean at a time.



COMMUNITY STORY

Donating Computers to Wisconsin Communities

Our Community Computers program is helping to provide Internet access for underserved citizens.

How much time do you spend on your computer or mobile device each day? Most Americans average over five hours.⁸

According to the U.S. Census Bureau, in 2012, nearly 80 percent of households had a computer, and nearly 75 percent had access to the Internet.⁹ We use smartphones and laptops to communicate with friends, family and colleagues; conduct research; learn about health and nutrition; look for jobs; and do our banking and shopping.

Lack of access

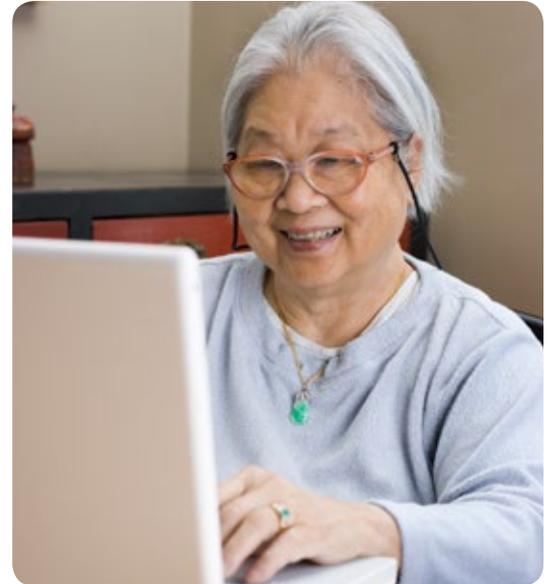
But many members of the community, including low-income families and older people, are disconnected from these communication vehicles due to a lack of access or poor digital literacy.

To bridge the digital divide, our health plan is providing computers and Internet access to community members who would otherwise be unable to afford them. Through the Community Computers program, we refurbish decommissioned UnitedHealthcare computers and donate them to local community-based organizations (CBOs). We also help the organizations set up computer labs for their clients to use.

“The Community Computers program gives people access to education and information that most of us take for granted,” said Daphne Jackson, marketing manager, community and provider engagement.

Laptops for 45 organizations

In 2013, we donated laptops to 32 CBOs in 16 Wisconsin counties. This year, we have donated laptops to an additional 13 CBOs in 10 counties, with plans for additional donations through the end of the year.



The computers are hand-delivered to deserving nonprofits that serve Medicare and Medicaid populations, from health care providers to senior facilities and community resource centers. Community groups are selected based on a review of applications.

The donated computers give community members the opportunity to learn basic computer skills. They can then apply for jobs, learn about health and nutrition, review their health care coverage or sign up for health care benefits.

Growing the program

The need for democratic Internet access is growing each year, but most community-based organizations don't have the funds to purchase computers directly. The 45 organizations we partnered with are relying on the Community Computers program to help provide computers and Internet access to their members.

continued on page 4

“The Community Computers program gives people access to education and information that most of us take for granted.”

– Daphne Jackson, marketing manager, community and provider engagement



300%
INCREASE IN EBT USE AT
PARTICIPATING FARMERS MARKETS




1 in 9
HOUSEHOLDS
in Wisconsin faces
food insecurity⁴




**POOR
NUTRITION**
CAN HAVE DAMAGING, LIFELONG
EFFECTS ON CHILDREN⁷

MEMBER STORY

A New Beginning *continued*

Dwayne was embarrassed to admit that he couldn't read the dosage instructions on his medicine bottle – or anything else.

manager, wasted no time connecting with Dwayne, and he agreed to participate in the program.

Member couldn't read his pill bottles

Kelly visited Dwayne during a recent hospital stay and worked with hospital staff to coordinate his discharge, making sure he understood the importance of follow-up care and how to take his medications correctly. Dwayne was embarrassed to admit that he couldn't read the dosage instructions on his medicine bottle—or anything else. He'd been taking twice the prescribed dosage of pills.

Kelly developed a treatment plan with Dwayne and continued to meet with him and his doctor at follow-up appointments. She referred him to an Optum social worker who helped Dwayne find housing and get the clothing he badly needed.

Kelly also prepared a folder for Dwayne that contained his vital health information, including a place to record his weight and blood sugar readings. Finally, she drove to multiple homeless shelters, retrieving important personal items he'd left behind—including a glucose meter and essential medications.

Off the streets and out of the ER

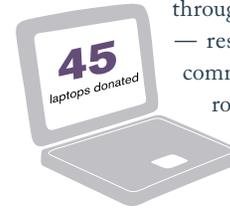
Kelly accompanied Dwayne to subsequent appointments and she continues to check in with him twice a week, making sure that he's following his treatment plan. A dedicated care manager, she willingly invested countless hours helping Dwayne understand how to care for himself, and coordinating the many services he needed to regain his health and dignity.

Today Dwayne is off the streets, taking his medications and accepting more responsibility for his own well-being. He is no longer visiting the ER for his primary care needs.

COMMUNITY STORY

Donating Computers *continued*

The recipient organizations were thrilled to receive the computers. They spread the word throughout their communities — resulting in our renewed commitment to give a second round of donations in 2014.



ONLY
59%

of seniors report going online¹⁰



1 in 3

PEOPLE

earning less than \$20K/year can't or don't access the Internet¹¹

INTERNET USE REDUCED DEPRESSION BY

20%

in older adults, and improved their cognitive function¹²

¹<http://wiscap.org/wiscap/wp-content/uploads/2013/05/State-of-Homelessness-Annual-Report-2012.pdf>

²<http://www.nhchc.org/>

³<http://www.choosemyplate.gov/printpages/MyPlateFoodGroups/Fruits/food-groups.fruits-amount.pdf>

⁴<http://www.wisconsinbudgetproject.org/one-in-nine-wisconsin-households-face-food-insecurity>

⁵<http://feedingamerica.org/hunger-in-america/hunger-studies/map-the-meal-gap.aspx>

⁶<http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTCY5/EXTCY5/EXTECD/0,,contentMDK:20207804~menuPK:528430~pagePK:148956~piPK:216618~theSitePK:344939,00.html>

⁷http://fondyfoodpantry.org/hunger_stats.html

⁸http://www.huffingtonpost.com/2013/08/01/tv-digital-devices_n_3691196.html

⁹<http://www.pewinternet.org/2013/10/08/technology-adoption-by-lower-income-populations/>

¹⁰http://www.census.gov/hhes/computer/files/2012/Computer_Use_Infographic_FINAL.pdf

¹¹<http://www.pewinternet.org/2014/04/03/older-adults-and-technology-use/>

¹²<http://www.modern-senior.com/the-benefits-of-internet-literacy-for-seniors/>



www.UHCCCommunityPlan.com

UnitedHealthcare Community Plan
Attn: Ginger Dzick
10701 W Research Drive
Milwaukee, WI 53226