



Pivoting from COVID-19 – Navigating the Road to "Normal"

SHSMD webinar transcript

Stephanie Stewart: Welcome everyone to the SHSMD webinar, "Pivoting from COVID-19 – Navigating the Road to 'Normal.'" SHSMD would like to extend a sincere thank you to Accenture for sponsoring today's event. A few reminders, this webinar is being recorded and is broadcast in listen-only mode. Feel free to take your questions, comments, responses into the chat at any point as we've allotted time at the end for Q&A. The chat is located on the bottom right-hand side of your screen. Now, it's my pleasure to welcome Suzanne Hendery, chief marketing and customer officer at Renown Health and SHSMD board member to kick off today's session. Over to you, Suzanne.

Suzanne Hendery: Thank you, Stephanie. And thank you everyone for joining us today. It's our pleasure to produce this follow-on to an original session offered at the SHSMD annual conference this year where we talked about the value of loyalty. We received

questions from many of you about how we implement, deploy and measure the success of this loyalty program that targets older adults. So, it's our pleasure to be here with you today.

I'm joining to introduce us, starting with Cristal Herrera, who is our director of marketing and customer engagement here at Renown Health in Reno, Nevada. Tori DellaRocca, who is our senior loyalty program specialist here at Renown and the champion implementer of this program. And we could not have done any of this work without Linda MacCracken, who's the principal director for consulting in the healthcare area for North America for Accenture. The next slide talks about our agenda today

We're going to be starting with pandemic pivots, talking about how the pandemic has not only focused our efforts on healthcare but on older adults in particular. Second, we'll be getting into the budget and the growth alignment

reset. Third, how we're using digital health to engage our customers. Fourth, how we're deploying this work. And fifth, the voice of the unengaged customer. Next slide, please.

Here at Renown Health, like many of you, we've made a lot of pandemic pivots regarding the way we approach our work and the world. And we made a number of those starting 18 months ago when many of us were faced with this public health crisis. Not only did we move out of the healthcare hospital space, but we then became the implementer of all the vaccines for our northern Nevada region. Our public health department simply did not have the person-power to be able to vaccinate everyone who needed a vaccine. So, we stepped into that role.

We also took our parking garage and outfitted it as a field hospital for up to 1,400 COVID patients. We ended up serving about 400 patients in that parking garage because our ICUs could not handle the volume of COVID patients we were receiving. Because of those workforce challenges, when our hospital facility was full and our workforce was tapped full up, we moved to remote care monitoring for many of our COVID patients at home, where we could have clinicians monitoring them on a 24/7 basis. But they were at home sleeping in their own beds, eating their own food, and still getting that hospital-level care at home. And we've continued that work.

We've also moved on to expanding that care model with urgent care services for our older adults and something called a BRIC, which is an all-inclusive program for special segments of our market.

Many of us also served as public information officers in our command centers during health incident command and took control of all the communications both internal and external. We certainly had to do much more on the digital front. I'll be talking in just a minute about our personal outreach and "no one left behind" strategy with personal assistants who serve our older adult audience. We changed from a marketing department focus to thinking about the entire customer experience and engaging people through our contact center.

There are also other older adult shifts that we've seen that illustrate the importance of seniors in the marketplace and across the country and the world as far as needing extra attention. We pivoted to make sure no one was left behind. There were expectations of missing the right experience when we were starting as a nation to restrict visitors at the bedside for not only COVID patients but all patients. That impacted older adults and how we worked to exceed the expectations of all our customers and, in particular, this older adult audience.

On the next slide we're going to talk about our Sterling Silver Club. That is the name that our older adults, 55 and over, gave this outreach effort to build loyalty and enhance their experience with our health system. It includes medical practices, urgent care, hospitals, and a large employee medical practice. The benefits are to overcome the experienced challenges that most of us have in healthcare. To be able to exceed what older adults expect from us.

But first, we had to understand what they expected from us. We also needed to support our Renown strategic plan by putting the customer at the center. And when we look at all our customer groups, the customer group that uses healthcare most focuses on those people 55 and over.

How could we segment our offerings to reach this audience? Not just for the healthcare services, but also our provider-owned health plan, which offers a Medicare Advantage program. And how could we close those care gaps with these older adults so that we make sure we were offering the best in population health, whether that's following up on mammograms or colonoscopies or wellness visits or other things that these older adults might be missing out on?

On the next slide, you'll see my mantra, which has followed me for 30 years throughout the healthcare space. Whenever there's a disagreement between what people think is best for our patients or our customers, I always encourage them to ask our customers first and go to our customers. That means don't just be the translators or the interpreters of what we think they want but ask them what they want.

The quote is, "We always ask the customer first and keep rechecking in our design stage, early on. And then when we move to our deployment stage, that includes tracking that customer experience, our social and digital media and health, as well as the participation that we're getting from that segmented group. And then we redeploy to look at how we're tracking to our strategic plan,

our mission, our vision, our goals, and our values. And how we're using those engagement metrics to confirm that personal health connection to optimize the value that we bring to our customers and our region."

On the next slide, you'll see we started first by asking who do we serve today? And when we asked that question, maybe like many of you on this webinar today, you get a lot of blank stares. You don't know who we're serving. And we asked our health plan leadership, "Who are we serving?" They went to that pink box. They said, "homebound and stationary." Why? Because even though that's only 11% of the folks we were serving at the time, those are the people that were coming in for doctor's appointments, those were the people when we looked at the claims data who were filing many of the claims.

But Linda and Accenture helped us see the full spectrum of all of our customer groups. And what we saw was 30% of our customers in our Medicare Advantage program were engaged and locally active. They were socializing, they were traveling, they were digitally savvy, they were very involved. And in fact, they were not coming into our practices regularly. They were living their lives and doing a great job at that. We were also serving the 27% of those nesting in place who are focused on their home life and their families. And they were in our middle-to-lower-income group and had special trips out for special meals or short trips to family and friends.

And then our next group were 20% who were active wealthy travelers. Linda

terms those the “active go-goes.” They have high-income careers, they're still working, they're traveling. At that time in the US and globally, they were highly engaged. These are also what we call our snowbirds, who feel like it gets too cold in Reno in the winter, so they might go to Palm Springs or Arizona. They were spending part of their time here in northern Nevada and part of their time in warmer locales.

What we were missing were our rural adventurers. So here in northern Nevada, we serve 100,000 square miles and most of the population is segmented in very rural communities where you might have to drive two or three hours to a doctor's visit. And we were attracting these folks to our Medicare Advantage plan. They were spending time outdoors; they were active and adventurous. And they were loving the communities that they had sought to live in. But they certainly needed us to provide outreach and care.

We worked with our leadership across Renown Health to make sure that they not only understood what these customers looked and felt like and what their interests were. We had them name each of these. People had family and friends or grandparents who could slot very quickly into one of these groups that kept it top of mind for our leadership as we were planning policy decisions or staffing and facility decisions to make sure we were geared toward the customers we served.

On the next slide, you'll see how we use that to navigate the experience with an easier product mix customized to those segments. We started by asking people

what they wanted. Our customers said they would like a personal healthcare assistant to help them with booking appointments, closing care gaps, reminding them about the mammogram appointment, or maybe they were slotted for a memory disorders clinic and have difficulty reminding themselves about appointments. Or they needed transport. So, we now have personal assistants that provide one-to-one outreach to our Medicare Advantage members. They also receive priority access to appointments with us. They are glad to have that personal assistant to help them with whatever they need through that healthcare journey.

We also heard from our customers that they wanted more virtual care. This was even before the pandemic. They wanted virtual visits for urgent, primary, and specialty care. And they wanted a national connection to Teledoc when they were traveling, so if they had an incident and they were traveling, they could call and have a virtual visit with a care provider for urgent care, dermatology, and other specific healthcare needs.

And third, we found that there were transportation issues, especially with some of our rural folks. So, we partnered with transportation so we could get personal assistants to get people to their medical visits. And we made sure people weren't missing out on important healthcare treatments because of those transportation issues. I think we are going to move over to Cristal Herrera for the next slide. Cristal, are you ready?

Cristal Herrera: I am. Thank you so much, Suzanne. It's incredible to see the amount of work that went into building this infrastructure that led Renown to be able to focus on personal journeys with our membership and our audiences. It does start with asking our customers what they want and to our surprise, many people were interested in staying in digital communications. When we mentioned MyChart, our focus groups said, "We love this tool. Please continue to communicate through those channels." And sure enough, we're seeing 42% of our members prefer email and digital communications. That helps us readjust and align how we go about recruitment and building personal journeys online via social media campaigns, and AdWord campaigns, things that we do around content with Google AdWords and YouTube.

We're seeing so much more conversion with our membership and new older adults who are interested in joining the Sterling Silver Club through our channels. With all our events and promotions up before COVID, we noticed that digital communication was the way to go. We were selling out all our events within an hour of posting them. People felt this sense of FOMO or "fear of missing out," and they were calling Tori to say, "Hey, why am I not getting into these events on time?" And we had been able to encourage our members to tell us more about them, to trust us with their data and it's helping create these personal journeys and multiple touchpoints on channels that we never thought this audience would gravitate to. So, it's been so exciting to see how Facebook, social media, YouTube, and all

these digital channels are taking off for this older adult audience.

On the next slide, I'm excited to share with you how we are activating this loyalty program because most of us think of a loyalty program as a card where you start to gather points. But it's more about building an emotional connection with individuals and fostering trust. It's about forming a relationship that's not only for the health and wellbeing of our members, but it's also improving adult lives. And it starts with knowing our customers so that people feel they can trust us with information outside of demographic information. That has been rewarding for our team because it's helping us anticipate needs and design interactions that focus on what they want to see and how they want to engage with us. It helps us measure that. We continue the cycle and build programming that is meaningful, and that people want to come back for.

The best part about this process is that it helps us stay consistent. We are learning from it every single day and from every interaction. One of my favorite pre-pandemic events was a gala that we held one week before everything got shut down. In March of 2020, we held this 1920s gala and invited our members. We had over 400 individuals show up. We had providers, customer experience team members, and our personal assistants. The marketing communications team attended and interacted with our members to talk to them and have a great time. To this day, people talk about that gala and ask us, "When are you going to hold an event like this again?"

Tori is going to talk to you a little bit about how we are engaging with our membership now during this pandemic and how we went virtual, with some examples of how we continue to engage with our membership. How we took all the data, the infrastructure, asking questions to build this trust and emotional connection with individuals within our community that has led to a lifetime of loyalty and then speaking to us for additional information.

On the next slide, this is something that most marketers see as far as this idea of moving to a digital front door. It goes back to that concept of fear of missing out, this FOMO. We're opening all these windows and encouraging our members to go digital. Any time they're seeking information on upcoming events or what's happening in the community or where they can talk to a subject matter expert, there are multiple ways of getting that information.

It's not always about calling somebody, even though we have that option. You can go online; you can talk to our chatbot. You have access to, in this case, Tori on the call who's our famous senior loyalty specialist who is always willing to answer any questions. But we've opened up the idea that this information can live in multiple areas. And the front door is always open, but there are also all these windows where you can see through and get all the information that you possibly need. What we're also starting to see is our members being vocal on digital channels and being their own forum, building chatter around topics and asking questions within our private Facebook chat.

On the next slide, you'll see an example of this. What we've noticed is our customers do want to communicate with us. And we see a lot of great engagement when it comes from individuals. A lot of times, Tori will be posting throughout our Facebook communication channel and people gravitate to the fact that there is a person behind this account. There's an example here of Gail, who is 10 months post-chemo and she's attending our yoga classes that we do virtually. And it's helping her move and stay healthy and she wants to make it known and tell Tori how much she appreciates that we hold these events. People are getting personal and letting us know how much they appreciate programs. It's thanks to all the great work from the Renown Health team and Linda's assistance and Tori's commitment to helping our membership feel like this is an authentic loyalty program that's here to serve them and help them through their health and wellness journey.

On the next slide, it's important to make sure we have line-of-sight to what our goals are. And we have identified key performance indicators that keep us on track. It's what we continue to measure throughout the program to make sure we're holding the integrity of what we have built. Tori's going to share a little bit about all these metrics throughout her upcoming slides to show you; how we keep our membership engaged and how we as a team also see that fulfillment in all of the work that we do every day. So, with that, I believe Tori you're up next.

Tori DellaRocca: Thank you so much, Cristal. I just love seeing how our members are digitally engaged and where we're going. Thank you to Suzanne and Cristal for being such wonderful leaders and supporting this work. I couldn't do it without you. So, thank you so much. The next slide is one of my favorites. These are our real members. I get to share the real stories and the deployment of the Sterling Silver Club and how we're able to make it happen. Each year we have a Sterling Silver Club star search, which is such a fun thing for us.

On the next slide, we show you our real members. These are members that nominate themselves every year we hold this star search. And they tell us a little bit about their story, which helps us emotionally connect with our members and celebrate them in their glory. It's a lot of fun. We hire a photographer, and we do full makeup and have a lot of fun. And then we interview them. We also do short videos where we can then recruit other members.

You'll see here on the top far right corner, a retired architect that's here in town, who's introverted. He's in our rural adventurer segment. He goes on five-mile hikes every day. We've learned a lot about each of our members and who they are, and which segment they fall into. We also have our friends in the bottom right corner that are masked up there. We can highlight them as being active in our community and Rotary International. One thing about being able to celebrate our members is that they then become ambassadors for us. They're taking the Sterling Silver Club

and showing people, they're advertising, they're seeing themselves up in billboards and then they're sharing it with their friends and their family and honoring that.

We're able to take them as ambassadors and have them help us with the programming. So, while it's just me and one other that are doing all the Club programming, we couldn't do it without the support of our leaders and our members. These members can help us design programs for the Club and volunteer; we can call them on anything and everything that we need and they're there for us. That's been a lot of fun.

On the next slide, I wanted to show our digital experience. Cristal shared that our members are very digitally engaged. We've designed this landing page for them so they can see where to go and whom to contact if they have any questions. Our Club facilitators, myself and Dena Johnson, are there at any point. They can email us, they can call us, they can reach us on social media. However they want to reach us, we are here to answer their questions and to build programs that they want.

We also feature all our events on our website. We have our forum. It is a hub for our members to go to and send others to that want to join the Club. So that's been a lot of fun for us. And we can track all our events, how we're doing with registrations, where we need to grow, and as Cristal said, we have an e-newsletter that goes out to our members on Monday. We sold out for our events this week and next week within an hour. It's incredible, the fast

turnaround that we're having.

On the next slide, I just wanted to show how we're able to deploy these segments that we've talked about and have engaged events that each of these segments loves to attend. We're able to target each of these segments to say, okay, we know that these segments love these events, so let's send it to them first and say, "You're first to know about this event!" A lot of the time it can sell out that way as well. These are just some of the events that we have had. We have a lot of health-based topics.

We've talked about MyChart. Our members love MyChart, but we want to help engage them on how they can utilize MyChart to take care of their health. Our members are learning how to message their doctor, how to order their prescriptions – you know, anything and everything. They can get their healthcare and look at their results there on MyChart. It's been wonderful to work with our MyChart team on providing that education and connecting more of our members to that wonderful tool.

We also have a genetic testing of population health study. We offer free genetic testing. It's a Healthy Nevada project that's a collaboration with Renown that has been so great for our members to get insights into their genetics and how they can look and see maybe if they have the BRCA-1 gene. They're able to look and see what they can do on the prevention side to improve their health and understand and maybe share that with their family as well to improve their family health.

Regarding our community-based events, I wanted to share with you a unique partnership that we started just a month ago. We partnered with a local arts foundation. They were having trouble getting people to attend their fundraiser. We were able to offer a deep discount to our members to attend. It was a safe event at a local golf course and there were different artists throughout each of the golf course holes. It turned out that 20% to 25% of the event participants were our Sterling Silver Club members. It turned into a Sterling Silver Club event where we were able to go and have fun and support this cause and connect them to a nonprofit that they didn't know about, which is wonderful.

Yoga. As we mentioned, we offer yoga twice a week. We did just start in-person classes. We're venturing into our in-person world again for our rural adventurers because they live rurally. They love meditation, which we offer twice a month virtually. And we have informational lectures that they'll attend virtually and connect with. We also have a nature walk that we do monthly with our local Department of Wildlife. That's been a lot of fun. Our active and wealthy travelers like the prevention topics and anything to help improve their health. And they do love the galas and the special events. We're looking forward to going back to those.

They also like our hobby-based activities. We have a monthly cooking class our registered dietician puts on. We host those virtually and we'll be going in person soon. Lastly, for our home-bound and stationary and our nesting in place segment, as we've said, they utilize our

healthcare a lot, with a lot of ER visits and things like that. We want to connect them to our resources, to help their lifestyles and improve their health. Anything related to reducing isolation is what we push toward that audience to help them. A lot of these members are living in senior housing. We're trying to engage them and help keep them healthy.

On the next slide, I wanted to show this personalized encounter approach that we have. It fosters this emotional connection we have with our members. When the lockdowns started, we kicked into action in partnering with our internal stakeholders to say, "We need to reach out to our members. We need to call them." So, we started this call program and I was able to partner with our senior leaders and give them a list of 5 to 10 people each week that they would call and connect with. And boy, was it exciting when one of our members would get a call from the CEO of our organization!

We also partnered with our Medicare Advantage personal assistants that we talked about earlier. A quarter of our members are senior care plus. They're in Medicare Advantage. And our personal assistants already had it in their toolbox to want to call these members and look at their outcomes, look at any kind of outdated appointments and how they could improve and get them back to health. So that was a wonderful initiative that we did. We made sure that we took our lists and segmented them. We made sure we were calling our eldest first and moving down the list from there, to reach those that were in the greatest need.

It allowed us to listen to our members and ask them how they were feeling, provide them with resources, and then figure out where are we going to go as a club. We went from in-person to virtual so fast and we were able to learn along the way with them. Based on those calls, what we learned was that our members were willing and able and wanted to be back in person for events. This is our printed newsletter that comes out quarterly.

And this last summer, we were able to feature one of our members who is the executive director of a local arts nonprofit. They host the largest month-long arts festival here in our community. So, we were able to highlight her. We were so excited that they were able to come back and have their month-long event, so we partnered with them, bringing our members out to a concert series every Wednesday of July. We had a New Orleans jazz band come. This was one of the first events that a lot of our members had attended, going back in person. It felt safe to them, and they were so glad that we were there for them.

Our members do reach out to us whenever they need support navigating care. And it's been fun to create this emotional connection. On the next slide, I'm going to share with you what our results have been since launching the Club. Today, we have more than 9,000 members. We're at almost 10,000 at this point and it's so exciting. We've been able to take our membership and match it up to our EMRs. So, 97% of our members are matched in Epic. What that allows us to do is track and see how

we're doing with loyalty, how our members are utilizing us, and where we need to improve and grow.

I will mention the importance of partnering with our internal stakeholders within our health system. They allow us to work with them to go and find these members in Epic and flag them so then we're able to pull reports from our business intelligence team and our CIO. We couldn't do this work without them. And we needed to bring them along at the beginning stages. When we started building the Sterling Silver Club, we had them there at the focus groups. They could understand what our members wanted and needed and the importance of it and why we needed to track it in Epic, and then see where we were in terms of utilization and how we could improve the health outcomes.

On the next slide, we have some results for you. For instance, we want to have a heavy focus on our preventative and wellness care. We want to look at the overall utilization of our members. What we found for the fiscal year 2021 is that 90% of our members had a visit with us. They're engaged with us and we were happy to see that. And we'll check that year over year to see how we're doing.

From the fiscal year 2020 to 2021, we saw an 11% increase in our primary care, which is amazing. We were thinking we were going to be down on preventative care because we were in the middle of a pandemic. People weren't coming to see us. But they, our Sterling Silver Club members, were. We had a lot of initiative and focus on our communications and our events that were on preventative

care, making sure that we're welcoming them back and telling them that it's safe to come back.

We also looked at our average number of visits per member for primary care. It was great for us to see how many visits they were doing a year. We wanted to look at our insurance next. That's always something that we want to track. We found that 225 members weren't established with a primary care provider based on their Epic records. We found 95% of those were Medicare. So, the next question was how can we help establish and connect them with a provider that accepts Medicare?

Urgent care is another important initiative for us. What was interesting in fiscal year '20 to '21 was, we did see a decrease. There was a 4% decrease in our urgent care. We wanted to continue to offer education on where, when, and why you should go to urgent care. And where urgent care might be better than the ER and that kind of thing. But when we started to look at our virtual visits, there was such an increase in virtual visits that it showed our members were digitally engaged.

We're going to continue down that road. We did host an event for virtual visits when the lockdown started, showing people what that experience was like and offering that support for them to engage and understand it so they feel comfortable to use it when they need it. We did look at our COVID vaccines and found that 40% of our members had utilized our drive-through clinic, as Suzanne mentioned. Our health department was inundated and needed

that support. So, it was great for us to offer that to our members and say, "You're first in line. Come get your vaccine." And I volunteered there and it was wonderful to see our members there.

Regarding ER visits, we did see a decrease in ER visits, down 1%, year-over-year. We're going to continue to work on that because we want that to be much lower and have our members utilize preventative care. Lastly, 70% of our Sterling Silver Club members are insured with us, which is wonderful to see. And now, I'm going to take it over to Linda. I must say I couldn't do this work without her as she helps set the stage and shows us the research. I'm grateful to have her as a friend and a partner, so thank you, Linda.

Linda MacCracken: The Advantage program had 20% growth. Tori, I was just commenting on your 20% growth last year, if we can just flip back to the last slide, was one of the highlights of your success. What do you attribute that to?

Tori DellaRocca: Absolutely. Yes. I'm glad you asked. Our increase in enrollment resulted from our digital strategy. We did 15-minute short videos of members. And then we were showcasing or advertising on Facebook, YouTube, and Google. And so our membership increased drastically from those campaigns.

Linda MacCracken: That's incredible. Any closing comments on this slide before I go into the last wrap-up?

Tori DellaRocca: No. Thanks for sharing these results.

Linda MacCracken: Thank you, Tori, Suzanne, and Cristal. And thank you for sharing your amazing experience in health management. They've done an enormous shift in growth. The first year's growth was 7%, the second year was 10%, last year in the middle of COVID, this truly human interaction, grew 20%. I'm grateful to SHSMD for having the chance to share these extraordinary programs. And hot off the press in the next slide, you're going to see some information that we were able to collect and is just being released right now on this program, thanks to SHSMD, of which Suzanne is a board member and Cristal is a rising star, winning an award last year. We're in with some major stars. And Tori's commitment to edutainment as you can hear is incredible, with sellout enrollment in these activities within an hour.

So, what happens if you don't do that? What are the consequences of unenrollment? What I'm showing here is what happens as a consequence of a negative experience. Because as you can see, the business of experience makes a huge difference. I have learned a tremendous amount following the Renown story. But I thought it might be helpful to say while we're looking at it, "What's the right way to do it, what's the worst that can happen if we don't?"

When we looked at negative experiences, and this is new research that's coming out in the US from Accenture, we're seeing that 50% of people with a negative experience are stressed and upset. That's important. But on a business basis, when we go back and say, "We've got to talk to people about what this means." A quarter of

them is going to say, "Less likely to get care the next time." If that happens, if we're having a Medicare Advantage or a health insurance program, then we've got a tsunami of disease that's coming for people who postponed care. And you've probably seen the CDC talking about how 40% of people deferred care.

Our research shows we've got seniors who defer care. But most of it is because they couldn't get through to the providers. So, again, I'm impressed with Renown Health. Tori orchestrated a call out to every member so there was no one left behind. I think the other business factor that might be helpful if you're thinking about a program like this is that 35% of the people are willing to switch providers. There's our leakage program. If we have a negative experience, we're going to switch. Are we going to complain? No. We're just quietly going to go ahead and schedule somewhere else.

One of the surprises to me was that only 13% said "negative experiences don't affect me." That's an issue. What's the business impact of doing something like this? One, we want better ratings. Two, we want to hold back people from switching. And three, we've got diseases coming up when we've got 29% that's combining the skipping-care-next-time and not-getting-the-care episode. If we look at negative experience, the numbers become more drastic. We want to arm you with facts if you want to undertake such a program and say, "What's the business value?"

Let's go to the next slide and look at what happens if we start talking about what's a good experience. This surprised our

Accenture team and probably not the Renown team about what makes a great experience. The concept of helpful advice is number one. The second one is having an efficient visit because people are concerned about their time. We watch research and conduct it on a regular basis. An efficient visit is important, not just because people don't have time, but because it feels safer. Because then you're not exposed to people who might have COVID, especially in this population.

And anything we can do to empower the care team to coordinate and engage with each other, is important. So, what's not on the list? This is a surprise. Affordability is not on the list. Digital technology. You can see that with Renown's personal assistant and deep social engagement, we're making discoveries about how people who are digital – immigrants are feeling very comfortable with digital – and now we're moving back into the importance of health. And I love and cheer on Renown because they see themselves as not just a healthcare or sick-care company, but a health company.

I thought it might be helpful to discuss what's most important for the provider interaction. Again, arming you with data points that Renown has already embedded. Explaining the condition and treatment clearly. Often when we work with clinicians we say, "What do you think is important?" They say, "Smarts, training." But we wanted to put these factors in front of you so that you can use them as you're starting to think about how to make sure that you have the right business and experience and can align

care teams to make sure that the negative experience drivers are reduced: long waits, cost and rude staff. So, giving you some stats to arm your pursuit of some of the great insights and opportunities to leverage loyalty.

If we go to the next slide, the question might come up, "How do we make sure that people feel more confident in managing their health themselves? How do the seniors become engaged with their provider with health management and self-care?" If we can start to have even the digital immigrants, those 65-plus, 55-plus, older adults, recognize that they can be part of the care team, then we'll all win. They'll know when to call, they'll know when to engage, they'll feel more comfortable, and they will become more like Renown's vision of being a healthcare company.

So, what do we need to do to have digital healthcare? First, provider recommendations. Does that mean we create scripts and help the providers recognize how to say what to which segment? Second, confidence in data security and privacy. You've probably seen the number of health systems that have recommended options that look like curations or say, "Hey, here are the apps that I want you to pay attention to." And then third, maybe doing MyHealth. And as you can see what Renown Health does in their edutainment offers is continually talk about how to manage the MyHealth.

We wanted to give you a sense of what Renown is doing as well as the cost of not doing it and some of the options and data that might help you launch a program like this. And with that, let me turn it over to

Cristal to handle some of the Q&A.

Cristal Herrera: Thank you so much. At this point, we want to open it up to anyone in the audience who has any questions for us. I'm funneling through the chat feature right now. I haven't seen any questions so far.

Stephanie Stewart: There were a few that came to me. I can start there.

Cristal Herrera: Perfect. Thanks, Stephanie.

Stephanie Stewart: The first one is how do you recommend my health system get started in building a loyalty program like this?

Cristal Herrera: I'm happy to kick this off. First, I think it takes an amazing colleague like Tori to be the face who interacts with your audience. Someone who's super committed to building relationships. But really, it is based on our senior leadership and our stakeholders who are committed to building these relationships. So, having someone at the table to help drive home the importance of customer engagement and how there's synergy around that and communications. Suzanne has done a fantastic job working with our president and CEO, Dr. Tony Slonim, who is passionate about serving our community. I always think it's involving all our stakeholders to see the value of investing a full team to be able to put on events and communicate all the great services that the organization has to offer. It starts there. Suzanne, how have you been able to help us be that person at the table? I'd love to hear how you

have been able to make us successful.

Suzanne Hendery: Thanks, Cristal. Well, we've talked a little bit about attaching marketing and communications engagement goals to the strategic plan of the organization. And how you show value to senior management and your community by the work that you do every day. When Renown moved to put the customer at the center of all of their strategic planning efforts and was looking for a tangible way to demonstrate how we do that, we asked "Do we know who our customers are?"

We needed the data Linda and Accenture provided in terms of who are we serving today, who might we serve better from a population health standpoint, and who uses healthcare services. And as we try to get our arms around doing a better job with prevention, where do we start?

We thought, this was the audience we wanted to start with. And having someone like Tori who could implement and then start to show results every quarter in terms of things like an idea is wonderful, but how are we implementing the idea and how are we moving toward progress? That's how Tori has blessed the organization with her talents and skills.

Cristal Herrera: Thanks, Suzanne. Tori, I have a question for you. Are your club events offered in person or virtually? And how do you keep members engaged virtually?

Tori DellaRocca: Great question. Because our members are unique and some are not willing or ready to go back in person yet, we found that we need to

bring that mix. We're venturing into this hybrid world, offering events that are in-person, virtual, and a hybrid mix of the two. Whatever fits their comfort level. It's been fun. The opportunity with virtual is being able to record it. So now we've got a whole great playlist of yoga classes. And our members, if they can't attend that day on Zoom, they're going and they're logging onto YouTube or Facebook and they're watching that video and then commenting things like, "I did it today and I feel so much better." It's been great.

Cristal Herrera: That's fantastic. Why should someone become a member and what does being a member entail? Are members patients? I love this question. Tori, do you want to tell us a little bit about some of the benefits of being a Sterling Silver Club member?

Tori DellaRocca: Absolutely. Yes. The only requirement is to be 55 and older and live in our community. We tell people all the time, "You don't need to be a patient of Renown." Just being able to learn about how they can improve their health and engage in events is really what we're hoping they benefit from. We do offer some discounts to our retail shops but it is about those special events and that information they're getting to improve their health is why someone would join.

The Club sells itself. We have a lot of events where we're going to sell the tickets until they sell out. A lot of people will join because they want to go to see the Glenn Miller Orchestra, or they want to see another event that we're offering. So, they'll join. And then they begin to

understand the other events and offerings that we have and start to benefit from them.

Cristal Herrera: Thanks, Tori. I'd also like to add a little bit to this question regarding the benefits of our Medicare Advantage plan, Senior Care Plus. We're trying to get to individuals before they're even considering a Medicare Advantage plan. Getting them familiar with the health system and things to keep them healthy because our mission is to keep our community healthy and be proactive. And we have built what we call BRICs. They are clinics focused on building relationships to improve care. And it's been amazing to have a dedicated clinic specifically for these older adults where we are helping them coordinate a lot of their care. That's an added benefit that some of these members may not necessarily know at the time. We are putting services around how we serve this older adult population and are already planting the seeds of how Renown is going to care for them throughout their continued care and as they age into a Medicare Advantage plan.

I would love to share this question with you, Suzanne. Have you considered a similar program for new parents?

Suzanne Hendery: Yes, we have. The challenge to my team on a regular basis – that's why you can see them smiling – is that this is only the first step. There are so many more segments that we would like to attract to improve their health across our community. We would love to do a program for new parents. We would love to do a program customized to veterans. Nevada is a very veteran-friendly state.

And some groups approach Tori and Cristal and me regularly saying, " We love the approach to older adults. How about us?"

Tori is just trying to find the bandwidth in terms of engaging our members as volunteers to start a special events committee, a health and prevention committee, an outdoor recreation committee, and a meditation and yoga committee. We can spin off and engage these members at an even deeper level so that they're soliciting their colleagues in the Club for ideas. They then come to Tori with program plans that are ready to be implemented.

However, with workforce challenges, we want to make sure we don't over-inundate them with opportunities. So, yes. We would love to do this, same recipe, and we hope you all use this same recipe. You may choose another market segment that you concentrate on. But the recipe would be virtually the same.

Cristal Herrera: Fantastic. Very exciting. Stephanie, over to you.

Stephanie Stewart: Thank you. And thank you for fielding those questions. If we didn't get to your question today, I encourage you to submit them through the survey that will pop up after this webinar ends. I just want to thank the entire panel today and of course you all for joining as well as Accenture for putting on today's event and sharing that data. A copy of the recording will be shared later today. And we will see you all soon. Thank you.