

## **Executive Spotlight: Monique Reese, DNP**

Monique Reese, DNP, senior vice president of home and community care for Highmark Health, leads the development and execution of home and community care strategy. With a commitment to health and healing in the home, Dr. Reese influences strategy development including the design of benefits, reimbursement, and networks.

We discussed the increasing importance of healing in the home and the impact of the COVID-19 pandemic with Dr. Reese:

### **What does it mean to heal in the home?**

Healing in the home requires an environment where individuals and organizations have the confidence, tools, and care they need. This enables people to have health in their home environment, age in their home environment, and heal in their home environment. We have developed strategies to create the solutions for both individuals and organizations that enable health and healing in the home.

So, for example, do we have virtual capabilities for individuals and their families to connect? Do we have the care teams available in the community that can provide a rapid response if needed?

We are focused on preventing disease, progression of disease, and any unnecessary utilization of hospitalizations or ED visits. The focus is on keeping individuals healthy and in their home environment. If individuals do need care, we are prepared to wrap services, resources, and tools around them. We want to give individuals the ability and the confidence to self-manage or provide teams in the community to support them in the home.

### **How has COVID-19 accelerated the shift to care in the home?**

Care in the home is much broader than an episode of home health. What we've seen over the last 10 years is the continual progression of consumers or individuals shifting to community-based care. Individuals and families prefer the home environment over other care settings, if it's possible and appropriate.

The COVID-19 pandemic has escalated that progression. We are seeing individuals' heightened desire to stay in their home. Some of that is just basic safety and wellness, but I believe it has also driven families, consumers, and customers to seek out new ways to access care.

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This demand is forcing provider and payer organizations to quickly develop solutions for accessing care. We are learning how to design benefits that enable access to care from the home environment. The COVID-19 pandemic simply fast-tracked what customers and patients already desired with health and healing in their home environment.

COVID-19 has accelerated the implementation of several of our strategic priorities. Virtual care and telemonitoring were a part of our strategic priorities, and we quickly implemented those capabilities across the home health network. This was to ensure timely access, scale the workforce across a larger population, and build a foundation that includes telephonic, virtual, and in-person visits in the home environment.

### **How has COVID-19 helped remove barriers and silos in post-acute care?**

Highmark Health is a health and wellness company, so we have both payer and provider organizations. We also have strategic relationships with provider organizations within the home health network. Being a blended health organization gives us a lot of opportunity to see home and community care from several perspectives.

There has been a large amount of regulatory burden lifted from both government and commercial payers. The regulatory changes due to COVID-19 have helped remove barriers in the home and community setting. Some of those barriers include the removal of a requirement of homebound status, creating payment for virtual visits, and payment for hospital-at-home services.

We have individuals and teams across organizations and markets coming together quickly to respond for the common good and for the communities that we're all serving. The COVID-19 pandemic has driven continual integration with regard to strategies, tactics, and how we respond at both a regional and local level. We quickly came together to organize around priorities including COVID-19 prevention, treatment, and healing. We worked across the organization to implement virtual care, telemonitoring capabilities, preventions/wellness outreach, and hospital-at-home models. The silos rapidly came together to improve interaction and collaborative discussions across the entire Highmark Health footprint.

### **How has COVID-19 led to expedited collaborative work between payers and providers?**

In March, we went back to our five-year strategic plan to see where we should move more quickly in order to respond to the COVID-19 pandemic. We asked, "Is there anything here that we can capitalize on to enable

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individuals to stay healthy in their home and heal in their home?” One opportunity was to increase the speed to implement telehealth and virtual technology in the home environment.

We shaped the capabilities from a payer standpoint. We gave home health organizations the ability to receive payments for virtual visits. With an increasing volume of individuals needing care – whether from COVID-19 or other illnesses – we wanted to quickly be able to deliver care to those people in-person, telephonically, or by a virtual visit. By moving that strategy up, organizations have the ability to invest in the right technology and the support to deploy it. Telemedicine and virtual visits allow us to scale a large workforce of highly skilled clinicians in a different manner and create access to care for our community.

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