PLAINTIFF'S EXHIBIT

MET-881

Date

TO: METROPOLITAN GROUP-INSURED FIRMS RE: METROPOLITAN VISITING NURSE SERVICE

In 1943, the Metropolitan Life Insurance Company introduced to its Group-insured firms the Five-Point Plan — a new procedure for using the Metropolitan Visiting Nurse Service, which is available to all the Group-insured employees who live where it is maintained. Under this plan, the employer reminds the employee of the Service, particularly at the time of illness, but the decision to use it rests with the employee.

Now that the plan has been in operation five years, we should like to share with you what we believe are its real advantages to you, your employees, the nurses who give the Service, and to us, your insurance carrier who sponsors it. As we see it, the advantages are as follows:

1. The employee who needs and wants professional home nursing care or instruction is having it more promptly and when he really needs it. The evidence of this is the fact that in 1948 we averaged 3.5 visits per case, in contrast with 1.8 in 1942.

2. The visiting nurse goes into the employee's home only with his knowledge and consent. Therefore, she is welcome and the employee and his family are more favorably disposed to accept her services and follow her suggestions.

3. The employee appreciates the fact that his employer makes this Service available and gives him the privilege of deciding when it is needed.

4. The Nursing Service is kept on a professional level.

With your continued cooperation we hope to make this Service increasingly valuable to you and your employees.

If you should like to discuss our Group Nursing Program with our local Nursing Representative, please call her or write me and I will ask her to call you for an appointment.

Yours very truly,

D. B. Armstrong, M. D.
Second Vice-President

AN EVALUATION OF THE FIVE-POINT PLAN

In 1948, The Five-Point Plan (our recommended procedure for the use of Metropolitan Visiting Nurse Service by our Group-insured firms) reached its fifth birthday. Under this plan, management assumes responsibility for seeing that the employee knows about the Nursing Service from the time he becomes insured, and that he is reminded of it at the time of illness, but he leaves it to the employee to decide if and when it is needed. Because the philosophy of this plan differs from previous concepts, it is timely to evaluate its effectiveness in terms of volume of Service, cost, and reflection in the attitude of the employer, the employee, the nurses who provide the Service, and the Group Division Representatives who sell and interpret it. It is also timely to review what has been done to establish and maintain this plan.

VOLUME OF SERVICE

In 1943, the year The Five-Point Plan was introduced, there were 124,059 home nursing visits made to 70,282 Group certificate holders. In 1948 there were 62,870 visits made to 17,906 Group certificate holders. This decrease of 75% in cases and 49% in visits during a five-year period might seem to indicate that the plan is not as effective as the previous one. The fact is, however, that aside from an over-all decrease experienced in the Company's total Visiting Nurse Program (29% in cases and 2% in visits) due to the excellent health record for the country as a whole and other factors, the additional decrease has occurred in Group Nursing experience largely through the elimination of routine referral of second-day ill absentees and the substitution of referral of only those who say they need and want the Service. Evidence for this is found in the important fact that in 1948 the Group Nursing Service averaged 3.5 visits per case, in contrast to 1.8 in 1943. This means we are reaching more promptly and, consequently, giving more care to those who need and want it. It means, too, that we are reducing to a minimum the routine referral of second-day ill absentees—a practice which we all agree should not be the responsibility of an insurance carrier.

In evaluating volume it is important to remember that we still have Group-insured firms which are not using the Service. It is our belief that this is due to the lack of information and stimulation which should come from the local Nursing Representative, the Group Division Representatives, Home Office correspondence, and promotional materials. Our Territorial Nursing Supervisors during their routine visits are urging interpretive visits by our local Nursing Representatives. The Group Service Supervisors are increasingly interpreting the Service and are giving us data on Form G. 648 about the firms which need more nursing information. The Group Nursing Unit is writing an increasing number of letters of interpretation and stimulation to these firms and, as indicated, is asking the local Nursing Representative to call on the employer.

COST

The reduction in nursing volume naturally means a reduction in cost to the Group Division and, consequently, to that part of Service costs to Group policyholders.

March 10, 1949

It also means that the Nursing Service outlays go for professional home nursing care, treatment and instruction, legitimate activities of an insurance carrier.

ATTITUDES

A. Employer

Each year it is increasingly easy to "sell" The Five-Point Plan to management, not only because Nursing Personnel believes in it and is enthusiastic about it, but also because management, too, knows it makes for better employee relations to see that the employee knows about the Service and is reminded of it at the time of illness but then is left to decide for himself if and when he wants it.

The Five-Point Plan is the "perfect" answer to the employer who says he hesitates to use our Service because the employee may question his motive for sending the nurse. It also is an answer to the competitor who belittles our Service.

B. Employees

The Group-insured employee likes the Service under The Five-Point Plan because he himself decides if it is needed, because the nurse then comes more promptly and he knows she is coming.

C. Visiting Nurse

One of the most difficult problems in the Group Nursing Program has been to overcome the resistance of our nurses to employer-referred cases. This is understandable when we realize that all other cases which the nurse carries have been referred by the family, the physician, or the insurance agent; and, of course, she is expected and welcomed. Consequently, the nurses are particularly appreciative of all that our Company has done to emphasize employee consent for all referrals. Because it is sold on its worth, the Visiting Nurse Service of New York is using our Five-Point Plan as a pattern for its individual contracts with firms for home nursing care of their employees. (For some Metropolitan policyholders, it gives such Service to ineligible or uninsured employees.)

D. Group Division Representatives

Much of the credit for the success of The Five-Point Plan should go to the Regional Managers, Group Supervisors, and Service Supervisors. It is they who first present the Group Nursing Program in the prospect stage and at intervals thereafter. Perhaps the biggest step which has been taken in the accurate interpretation of our program by the Group Division Representatives has been the use of the leaflet OUR GROUP NURSING PROGRAM in the Prospect Book and during Service calls.

PROCEDURE FOR INTRODUCING AND MAINTAINING THE FIVE-POINT PLAN

After the initial introduction of The Five-Point Plan to our Group Division Representatives, our Local Nurses, and our Group-insured firms, the use of the plan was implemented in two ways. First by starting all newly-insured Groups on The Five-Point Plan, second by working closely and individually with those firms which were using the Service extravagantly and non-professionally. This latter activity took patience, persistence, understanding and the full cooperation of the Group Division Representative, the local Nursing Representative, and the Home Office Representative. Outstanding examples of firms which changed their procedure from routine illness absentee visiting to The Five-Point Plan are R. H. Macy and Company and Sears, Roebuck and Company, both of which at one time used our Nursing Service to verify eligibility for their own disability plans which started payment after the third day of illness. Both of these firms agreed that such verification should not be our responsibility and have been most cooperative.

Another big help in bringing about better utilization of the Service by national firms has been the establishment with executive management of an over-all plan for using the Service in their various locations. Under this plan, management sends a statement of interpretation and procedure to each of its local managers and supplies the Group Nursing Unit with a sufficient quantity of these statements for general distribution to the local Nursing Representative at the time she is asked to call on local management. The local Nurse and the local management then adapt the firm's over-all plan to the local situation.

The first plan of this sort was worked out with Western Union Telegraph Company in August 1944. This was followed by similar plans with ~~Consolidated Gas Company~~, J. J. Newberry Company, Singer Manufacturing Company, The Greyhound Corporation, American Tobacco Company, Liggett and Myers Company, etc. During 1948 similar plans were established with Standard Oil Company (Indiana), Consolidated Cigar Company, Sun Chemical Company, Wyandotte Chemical Company, Continental Baking Company, and National Lead Company. Plans are in the making with Stouffer Corporation, Home Insurance Company, and Eaton Manufacturing Company.

This year we have gone a step further in management interpretation. Management is urged to enclose a statement over its signature with the Group Nursing leaflet when it is distributed. This is good because it gives management another opportunity to remind the employees of a Service which it is providing totally or in cooperation with the employees. Along the same line, Consolidated Edison Company sent a statement to all the physicians on its Home Visiting Panel, reminding them to utulize Visiting Nurse Service as indicated. Many firms also have distributed statements about the Service to their department heads asking for their cooperation in reminding the employees of the Service.

We realize that we still have many firms who are not using this Service and it is with these that we need to work during the next few years. We continue to be handicapped by shortages in Nursing Staffs, but we expect to work with those centers where Staffs are such that visits can be made and increasing caseloads can be handled.

In summary, the advantages of The Five-Point Plan to date have been:

1. More prompt and consequently more professional nursing care to the Group-insured employee who has a need for it.

March 10, 1949

2. The reduction to a minimum of routine referral of ill absentees.

3. The gross reduction in Nursing costs which, in turn, should be reflected in reduced insurance costs.

4. The nurses' appreciation of a Service provided on a professional level.

5. The employee's appreciation of his privilege to decide when he needs and wants the Service.

6. The recognition by management of this Service as another opportunity to strengthen industrial relations.

7. The opportunity for the Group Division Representatives to present a plan which can stand close scrutiny from both management and labor.

March 10, 1949