

Case Study: Impact of Strategic Planning

Introduction:

Historically, companies have struggled with the best way to package and deliver benefits to attract talent and retain staff. Today, companies understand that they need to leverage a variety of solutions to provide meaningful healthcare coverage, promote wellbeing and mitigate cost. Vital Incite delivers data-driven strategies designed to identify medical spend waste and improve efficient spend, allowing employers to reinvest in the correct resources that will improve employee health. For Company A, the desire for more data to drive decisions around wellness helped the Advisor and Population Health consultant coordinate efforts between the employer HR and C-suite.

- Key Information unique to this employer
 - Small manufacturing company with low turnover
 - o Past wellness program involved annual biometric screenings and health coaching
- Value of what was delivered
 - o Increase in annual physical compliance
 - Improved care coordination (decreased ER visits and decreased prospective risk)
 - Decrease in Zero RUB scores



Problem 1: Low Impact of Current Wellness Program

Prior to integration into Vital Incite, the Wellness Program included annual biometric screens for employees electing as a Wellness participant on the health plan. Subsequent Health Coaching sessions were dependent upon the biometric screening results. Employees could also earn additional incentives based upon the results of the biometric screenings. Aggregate reporting provided by the biometric screen vendor and feedback from employees indicated little improvement in biometrics and overall health status.



Problem 2: High Percentage of Population with No Primary Care Provider

The initial population health report showed a large percentage of the population with little to no information (Zero RUB scores), low annual physical compliance and a high percentage of adults with no Primary Care Provider (PCP). As with many other employers who elect to perform biometric screenings, Company A employees were thought to be viewing their annual biometric screening as an annual physical and not visiting a PCP on an annual basis to address high risk biometrics or other chronic conditions.

Recommended Solution

For the 2016 benefit year, the employer shifted their wellness plan to include annual physicals rather than biometric screenings as the method for collecting biometric data. Employees electing to be Wellness participants were required to complete an annual physical and submit biometric data to earn additional incentive dollars. For the first time, spouses covered on the plan also needed to complete an annual physical and submit biometric data for the employee to remain a Wellness participant. Before implementing another vendor solution, one year of physical and biometric data would be collected to determine where the resources could be placed.



Results

After the first physical collection period of the new incentive program, Zero RUB scores were reduced from 31% to 16% (employee and spouses) (figure A) and annual physical compliance increased from 38% in 2015 to over 80% in 2016 (through June) (figure B).

Employee & Spouse 50 45 40 35 30 25 15 10 2014 2015 2016

Figure A: RUB Distribution 2014-2016

	No Information	Healthy User	Low Risk	Moderate Risk	High Risk	Very High Risk
Risk Calendar Year	Percentage Member Count					
2014	30.77%	10.49%	15.38%	35.66%	6.29%	1.40%
2015	31.37%	13.07%	11.76%	35.95%	5.23%	2.61%
2016	15.63%	26.25%	17.50%	35.00%	3.75%	1.88%

Figure B: Preventive Screening Compliance

Year	# Eligible	# Compliant	% Compliance
2014	123	36	29%
2015	133	48	36%
July 2015-June 2016	136	113	83%

Since the change in wellness plans, the employer has also seen improvements in ER utilization (adults 21) as well as a decrease in prospective risk scores. This could be correlated to members having a primary care provider and health issues being addressed with the PCP before becoming severe enough to visit an ER. By identifying with a PCP, members are also able to better control and manage chronic conditions that can reduce prospective risk score (figure C).



Figure C: Care Coordination

		Company A	
	2014	2015	May 2015 - Apr 2016
ER Visits >=1	9 %	11%	10%
ER Visits >=2	1 %	3 %	2 %
Prospective Risk	1.23	1.04	1.03

Overall plan utilization (per 1,000) saw in increase in office visits (+23%) and lab claims (+58%) with significant increase in Administrative/Preventive care as expected, but overall medical cost PMPM, excluding high cost claimants, decreased over 23%.

With one year of data collected, Company A is continuing with collection of physical forms and biometrics for the next plan year. With the collected data and one year of Vital Incite reporting, next steps include addressing chronic condition management (hypertension and diabetes) with possible health coaching or disease management nurses and a communication campaign focusing on ER utilization/alternatives.



Contact Vital Incite Today!

Vital Incite helps you improve health and lower your costs. Accurate risk-scoring enables population health managers to zero in quickly and effectively on high priority cases.

250 West 96th Street, Suite 350 | Indianapolis, IN 46260

P: 317.663.8302 | E: mdelaney@vitalincite.com | www.vitalincite.com