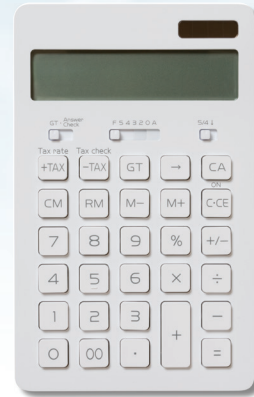


# [CASE STUDY]

## FORT WAYNE SCHOOLS



6x more for meds.  
10x more for labs.



We did the math.  
Things didn't add up.

**Does this remind  
you of your school's  
health plan?**

# [CASE STUDY] FORT WAYNE SCHOOLS

## The Background

Like many employers, Fort Wayne Community Schools in northern Indiana was being challenged by ever increasing healthcare costs. While benefits advisor RE Sutton provided suggestions to create better practices, it wasn't until they started using Vital Incite that they were armed with data to move in a bolder direction.

## The Challenge

The fact that the schools were operating in a geographic area known to have higher healthcare rates, as defined by a RAND study, created a great challenge in how to provide good benefits to improve the health of employees and be fiscally responsible.

- medications provided by hospitals than in office settings cost 6x more
- colonoscopies cost 3x more
- labs cost 10x more
- X-rays or CT scans cost 3x to 10x more
- Orthopedic care costs 2x to 3x more

## The Results

Vital Incite uncovered at least \$1 million in total health plan savings and established an objective view of how the schools could mitigate future risks. The key was analyzing the school system's data and knowing what to do with it. First up was an improved direction of care or direct contracting for centers of excellence.

Next, was strengthening members' ties to primary care. Less than half of the members received annual physicals, which contributed to later stage diagnoses. Identifying diabetes and hypertension, and improved control, offered the opportunity to save \$17,000 per person/per year. Moving just 5% of high-risk individuals to medium risk through improved intervention could save \$500,000.

Finally, 72% of all ER visits were non-emergent or primary care treatable. With the average ER visit at \$4,700, a 10% decrease in this alone would yield over \$300,000 in savings. With stronger primary care relationships, huge savings are attainable along with a healthier member population.

Improving direction of care  
can prevent paying from  
**3-10x more**  
for the same service.

If just 5% of high risk individuals  
could improve to moderate risk,  
the plan could save over  
**\$500,000 annually.**

A 10% reduction in  
non-emergent ER use  
could save over  
**\$300,000 annually.**

