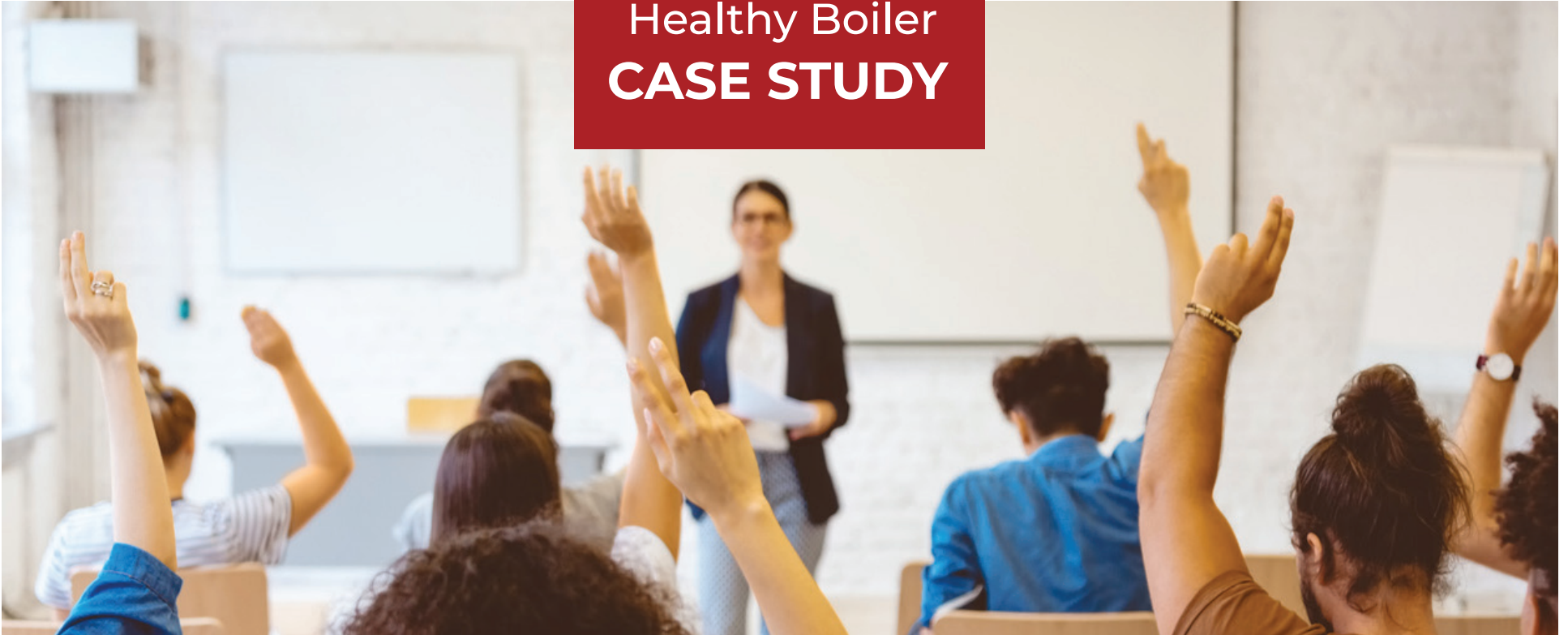


Healthy Boiler **CASE STUDY**



Wellness Program Gets Top Marks at Purdue University

Purdue University leveraged Vital Incite's data analysis to launch a wellness program that encouraged member engagement through monetary incentives. The results get top marks for health improvement and reduced spend.



SITUATION

Purdue University in Indiana was challenged with how to reduce their increasing healthcare costs, while driving member engagement in primary care and improving member health and wellbeing.

Their per member per month (PMPM) costs trends were rising every year over a four-year period and were above the 7.5% national trend increase.

STRATEGIES

Purdue leveraged information from Vital Incite's data analysis to put a wellness program together that included incentives for participation.

The Healthy Boiler Wellness Program focuses on five pillars:

- Behavioral health
- Financial wellness
- Physical health
- Social wellness
- Work-life integration

A key aspect of physical health included incentives for annual physicals, annual biometric screenings, health risk assessments, dental and vision exams and complete wellbeing screenings (ex. cancer, flu shot, pap smear, mammogram, colonoscopy).

Engagement in various approved activities related to the 5 pillars enables members to **earn monetary incentives** toward their health savings or health reimbursement accounts (HSA/HRA)

This program focuses on 3 main goals:

- **Reduce increasing healthcare costs and trends**
- **Provide members with an opportunity to improve their wellbeing while earning incentives**
- **Increase member awareness of their health risks and encourage them to be more active in their health**

RESULTS

Prior to the launch of the program, per member per month (PMPM) cost trends were increasing every year for four years and above the 7.5% national trend. Following the launch four years ago, **Purdue's PMPM trends fell below benchmark and have remained below ever since.**

Physical compliance has increased from 36% to 57% since 2014 and Cost Per Unit Risk (CPUR) for members with diabetes and hypertension has remained stable.

- Members without information has decreased from 12% in 2014 to 7% in 2022 (5% in 2021)
- Percentage of healthy users has increased from 16% in 2014 to 19% in 2022 (21% in 2021)
- Fewer members do not have an established primary care provider (21% in 2014 and 10% in 2022)
- Members attributed to the clinic has increased from 11% to 14% in the same period
- CPUR for members with diabetes and hypertension remained stable year-over-year and medication compliance has improved
- Volume of biometric data has increased dramatically

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VITAL**incite**

making health an asset