



# Mental Health Care Rooted in Hope, Measured in Outcomes

The Impacts Of Mental Health

Thoughtfully prepared for: Alera's Vital Incite S3 Event



# Today's Agenda



**1. Current State of Mental Health**

---

**2. Proving Value and ROI**

---

**3. Key Takeaways**

---

**4. Closing & Thank you**

---

# Principles for ethical & responsible AI in mental health care

AI use demands clarity, safety, and accountability

- |          |  |  |
|----------|--|--|
| <b>1</b> | <b>AI as an Accelerator to Our Mission</b>     | AI can help remove barriers, improve outcomes, and tailor care   |
| <b>2</b> | <b>AI That's Safe and Equitable</b>            | Clinically validated AI models ensure outputs are inclusive, safe and effective—using open source standards like VERA-MH |
| <b>3</b> | <b>Privacy and Security Are Foundational</b>   | Global compliance including HITRUST, HIPAA & GDPR to protect sensitive health data                                       |
| <b>4</b> | <b>Mutual Transparency and Consent In Care</b> | Mutual provider-member consent reinforce trust and therapeutic relationships   |
| <b>5</b> | <b>A Commitment to Continuously Learn</b>      | As AI evolves, we promise transparency and responsiveness to meet customer needs   |

# Mental Health Now Among Your Top Cost Drivers

## Top 3 Drivers of Healthcare Costs<sup>1</sup>

1 GLP-1s

2 High-Cost Therapies

**3 Mental Health Conditions**

## Forces Fueling *Surge* in Mental Health Costs

**6%**

of all U.S. adults (15.4MM) have a serious mental health illness, up from 5.5% (14.1MM) the previous year<sup>2</sup>

**50%+**

of patients with a high-cost physical health condition also have a behavioral health disorder<sup>3</sup>

**32%**

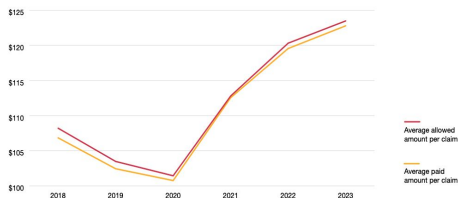
of out-of-network health plan claims are for complex mental health conditions<sup>4</sup>

1. Business Group on Health Survey 2. National Institute of Mental Health 3. Lancet 4. Spring Health claims analysis

# Why?

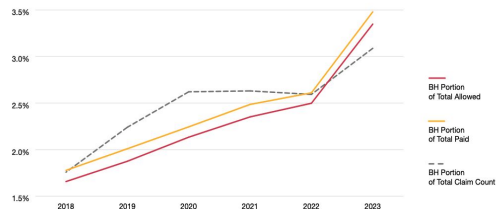
Each claim costs more

Figure 10a. Behavioral health unit cost trend 2018-YTD 9/30/2023



There are more claims

Figure 10b. Percentage of behavioral health total claims and claim counts among all medical claims 2018 – YTD 9/30/2023



50%

Increase in mental health spending since the pandemic

40%

Increase in in-person behavioral health visits

3.5x

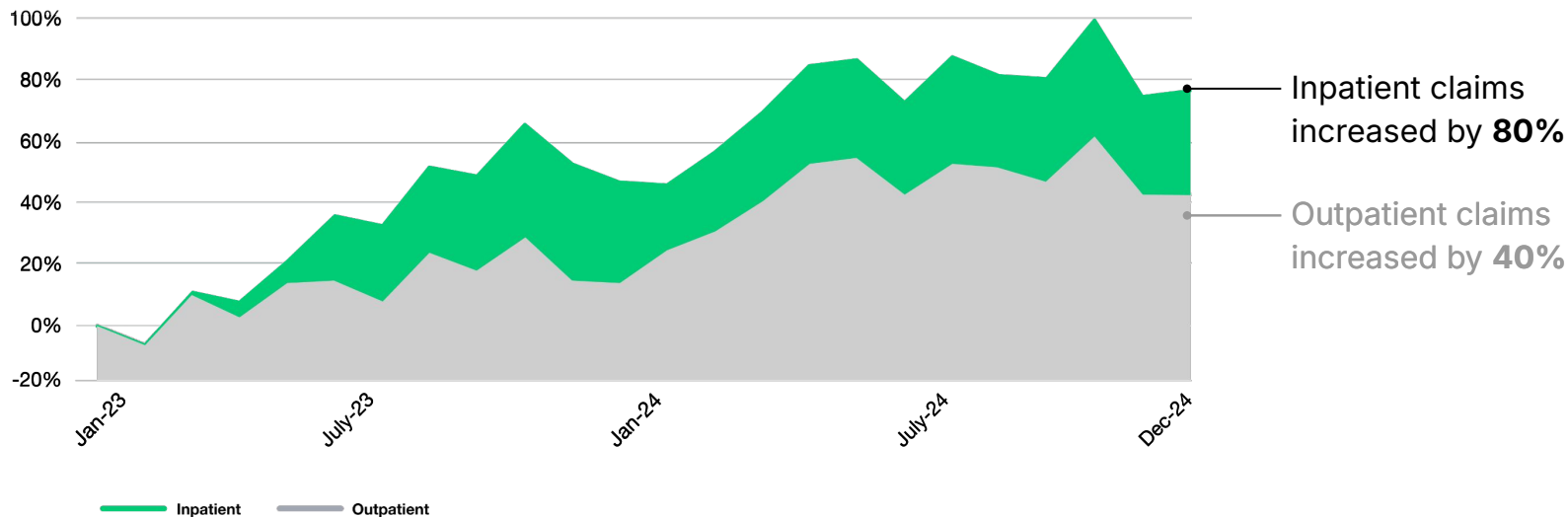
Likelihood to receive behavioral health care out-of-network, with 8.9x for psychiatrists and 10.6x for psychologists

31-34%

Behavioral health services are paid less than they cost to provide

# BH Inpatient Utilization Surging 2x Faster Than Outpatient

Percent Change in Behavioral Health Claims, 2023 – 2024<sup>1</sup>



# Current Gap

## The Managed Care Problem

### Care Quality Unclear

Minimal member utilization or improvement data

### Rising Costs

High OON utilization and rising high cost claimants

### No ROI Visibility

Cost effectiveness remains a "black box"

### Poor Member Experience

Slow access and high out-of-pocket costs



## "What Good Looks Like"

### Data and Cost Transparency

Is measurement based care utilized across all interactions?

### Quality and Outcomes

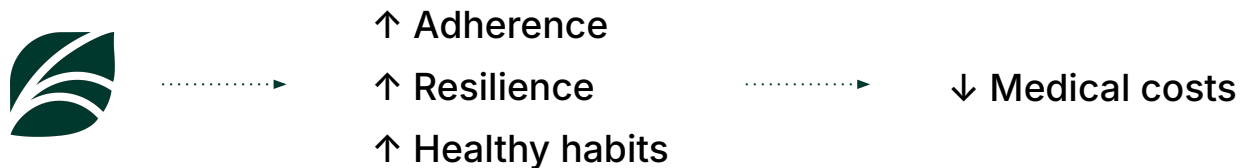
Are employees receiving care actually getting better?

### True ROI

Is total cost of care impacted by the solution?

# When mental health improves, medical costs drop

JAMA  
Network | Open.



PMPM reduction in total healthcare spend (net of program costs)

**\$357**

Asthma/COPD

**\$331**

Pregnancy

**\$382**

Diabetes

**\$417**

Chronic Pain

**\$456**

Gastrointestinal

**\$480**

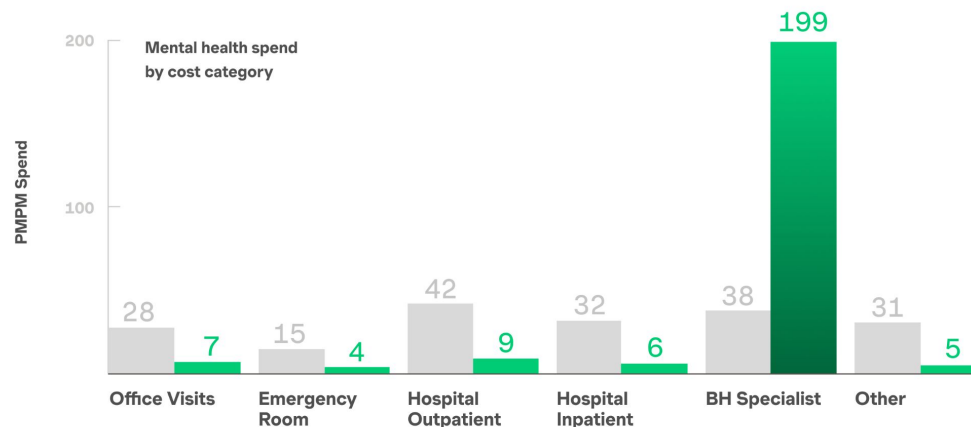
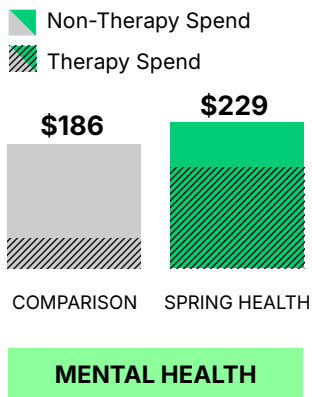
Hypertension

# Behind the Numbers: A Rigorously Validated ROI Model

|                               | What We Did  | Why It Matters  |
|-------------------------------|--|---|
| <b>Study Design</b>           | Cohort-based with matched control group                                    | Ensures fair comparison<br>(Spring users vs. similar non-users) |
| <b>Matching Variables</b>     | More than 150 physical and behavioral health conditions + prior-year spend | Reduces bias by accounting for baseline health risk             |
| <b>Data Sources</b>           | Medical + Rx claims, absenteeism, turnover, EHR                            | Captures full financial impact—not just mental health           |
| <b>Cost Inclusion</b>         | Includes platform + care delivery costs                                    | Results are <i>net</i> , not modeled or partial                 |
| <b>ROI Range</b>              | 1.2x to 5.2x   | Reflects real-world variation across employers                  |
| <b>Independent Validation</b> | Journal of HEOR (2025) and Validation Institute                            | Gold-standard review for actuarial and clinical credibility     |

# Your existing spend, spent smarter

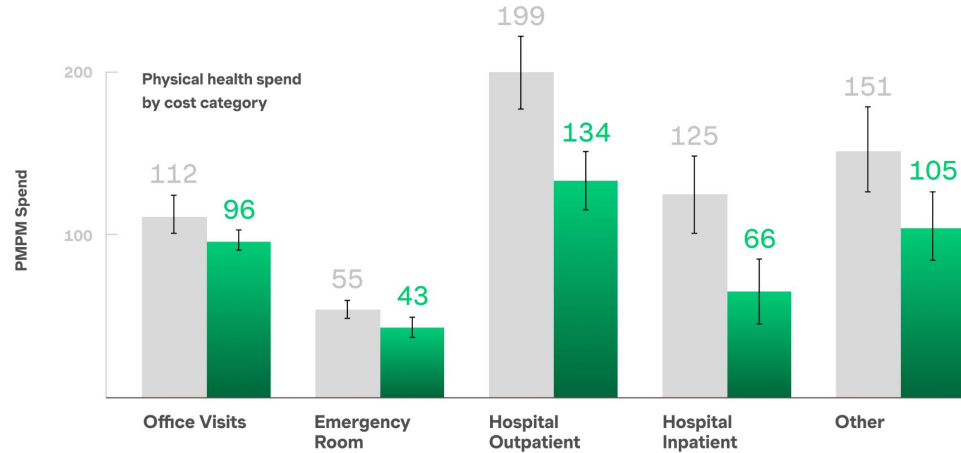
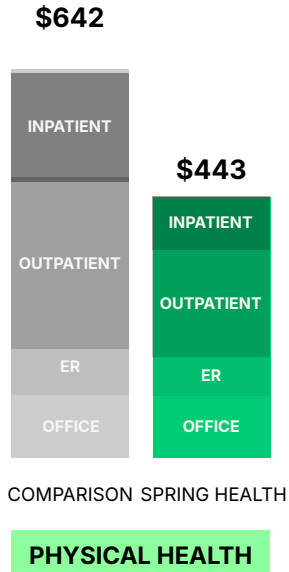
Quality behavioral health care mitigates preventable spend in high-cost categories



These charts contrast behavioral health spend for organizations using Spring Health versus the control group. With Spring, behavioral health visits increased, but costlier spend categories declined dramatically.

# Physical health improves when you're mentally well

Not only do mental health costs decline, but physical health costs do too



# Evaluating What “Good” Looks Like

## Outcomes

### Ask vendors to define:

- Member engagement
- Member satisfaction
- Clinical outcomes

*(Are people improving & How do they know?)*

**92%** show clinical improvements

## Transparency

### Ask for reporting:

- Is data real-time?
- Measurement based care?
- Available for all interactions?

**47%** increase in BH utilization in 1 year

## Financials

### Is ROI clear:

- Hard savings (claims)
- Soft savings (productivity)
- ROI methodology transparent?

**\$2 Savings** for every \$1 invested

***Bottom Line:*** If a vendor can't prove outcomes across **quality, transparency, and ROI**; they're not delivering on what “good” looks like.

Spring Health 

*Thank You!*




# *Appendix*



# Principles for ethical & responsible AI in mental health care

AI use demands clarity, safety, and accountability

- |          |  |   |
|----------|--|---|
| <b>1</b> | <b>AI as an Accelerator to Our Mission</b>     | AI can help remove barriers, improve outcomes, and tailor care  |
| <b>2</b> | <b>AI That's Safe and Equitable</b>            | Clinically and statistically validated AI models ensure outputs are inclusive, effective and limit bias |
| <b>3</b> | <b>Privacy and Security Are Foundational</b>   | Global compliance including HITRUST, HIPAA & GDPR to protect sensitive health data                      |
| <b>4</b> | <b>Mutual Transparency and Consent In Care</b> | Mutual provider-member consent reinforce trust and therapeutic relationships                            |
| <b>5</b> | <b>A Commitment to Continuously Learn</b>      | As AI evolves, we promise transparency and responsiveness to meet customer needs                        |



Built-in AI safeguards  
ensure our platform  
protects every user

## Our Safety Checklist

- ✓ Detects signs of risk and quickly escalate to human experts.
- ✓ Provides replies grounded in clinical best practices.
- ✓ Avoids repeating or validating untrue or harmful beliefs.
- ✓ Protects against tricking AI into giving unintended answers.
- ✓ Follows ethical guidelines.
- ✓ Enforces and ensures privacy.

# We're leading the way in *safe, ethical* AI

We developed VERA-MH, an open source standard scorecard to evaluate mental health AI safety.

