Leverage Data to Identify the Correct Vendor

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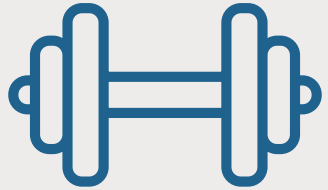
Types of Vendors

Direct Primary Care

Cardiometabolic



Musculoskeletal

Direct Primary Care

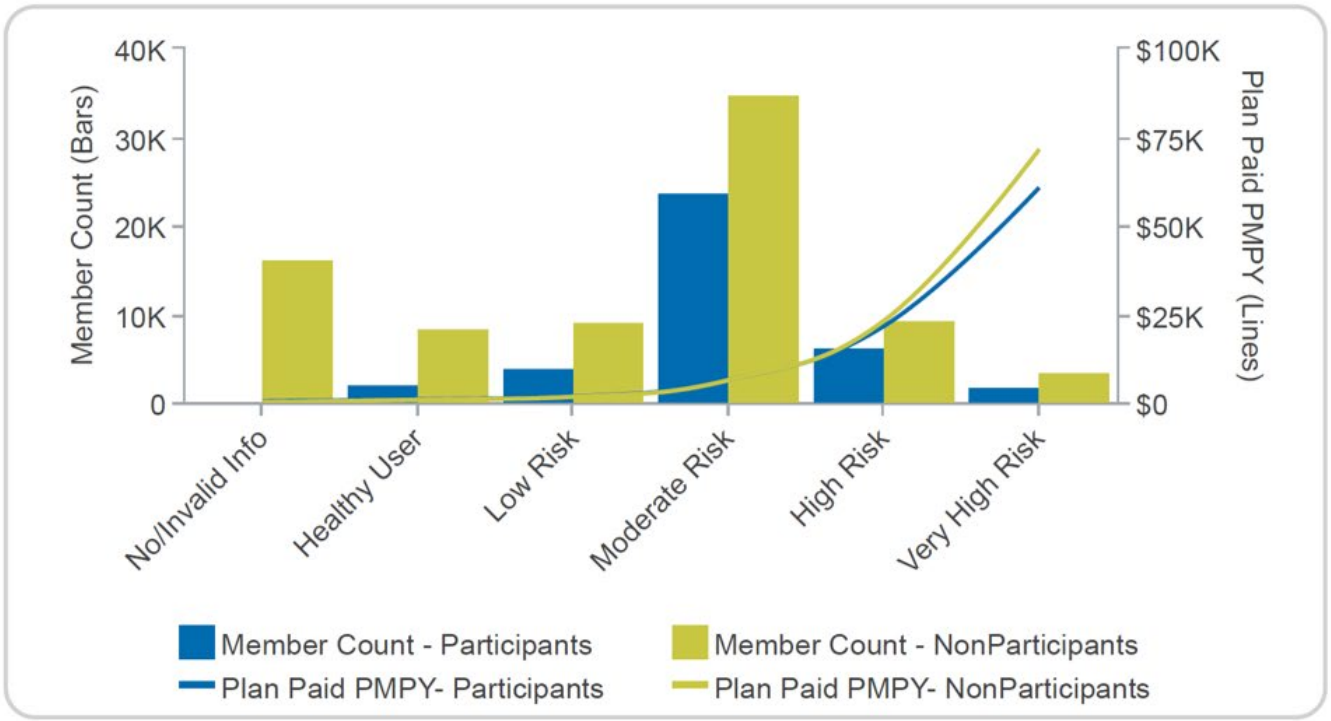
- Considerations
  - Local vs. Geographically Dispersed Population
  - Regional Challenges and High-Cost of Care
  - Size
  - Data Supports High Quality/Low-Cost Providers

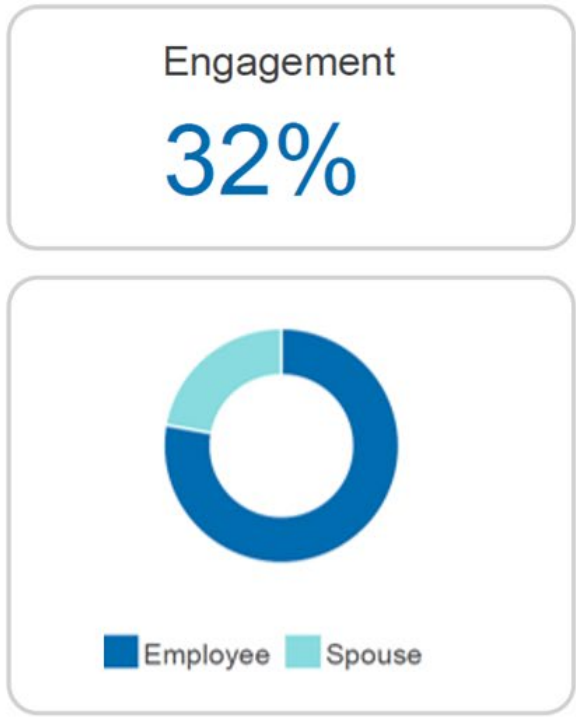
- Overview
  - Well-Aligned Incentives (Provider and Employer)
  - Engagement
  - Patient Satisfaction
  - Improved Clinical Outcomes
  - Reduce Healthcare Costs for Attributed Population

Additional Strategies an Onsite Clinic Can Support

- Health Coaching/Nutrition Counseling
- GLP-1 Programs
- Mental Health
- Physical Therapy
- Pharmacy
- Telehealth/Virtual Care
- Imaging (x-rays)
- Care Navigation
- Wellness Programming

Clinic Primary Care Engagement





	Total	No/Invalid Info	Healthy User	Low Risk	Moderate Risk	High Risk	Very High Risk
% of RUB Participating	**32%**	0%	20%	31%	40%	40%	35%
Plan Paid PMPY- Participants	**$10,994**	$418	$971	$1,758	$6,383	$21,602	$60,712
Plan Paid PMPY- NonParticipants	**$9,535**	$151	$806	$1,630	$6,355	$23,127	$71,506

Primary Care Provider Attribution

	Member Count ↓	Cost Per Unit Risk	Physical Compliance	Mammogram Compliance	Average Risk	% ≥1 ER Visit
Other Provider	55,635	$5,070	54%	62%	2.03	15%
Clinic	24,741	$4,983	63%	59%	1.49	11%
Not Attributed	11,374	$4,714	1%	10%	0.48	5%

Clinic Primary Care Hypertension Management

	Participants	Nonparticipants
Member Count	13,213	20,981
Concurrent Risk	3.32	3.91
Medication Use	61%	50%
Medication Gaps	7%	7%
Blood Pressure Values	88%	10%
Blood Pressure Control	79%	75%
Cost Per Unit Risk	$5,111	$4,504
Plan Paid PMPY (Med)	$12,541	$14,487
Plan Paid PMPY (Rx)	$5,025	$4,736
Plan Paid PMPY (Med&Rx)	$17,566	$19,223

Clinic Primary Care Diabetes Management

	Participants	Nonparticipants
Member Count	6,055	9,079
Concurrent Risk	3.87	4.76
Medication Use	74%	70%
Medication Gaps	12%	14%
A1c Values	77%	10%
A1c Control	72%	68%
A1c Compliance	47%	50%
Cost Per Unit Risk	$5,277	$4,648
Plan Paid PMPY (Med)	$12,777	$15,656
Plan Paid PMPY (Rx)	$7,971	$8,544
Plan Paid PMPY (Med&Rx)	$20,748	$24,199

Direct Primary Care Vendor Differentiators

	Data Limitations	Model	Blood Pressure Control	A1c Control	Annual Physical Compliance	Performance Guarantees	Risk Control	Recommendation
Marathon Health	Yes	Near-Site/Onsite Virtual	72%	68%	80%	Poor	85%	
One to One Health		Near-Site/Onsite	81%	76%	74%	Yes	80%	Yes
Ascension		Near-Site/Onsite	78%	69%	75%	Yes	83%	Yes
Premise Health		Onsite	86%	72%	58%	Poor	85%	
Proactive MD	Yes	Onsite	75%	70%	56%	--	85%	
Vera Whole Health		Onsite	80%	73%	77%	--	76%	
AHN (Optum)		Top Tier	84%	88%	76%	--	86%	
OneMedical		Near-Site/Onsite	69%	54%	82%	--	84%	
First Stop Health	TBD	Virtual	79%	88%	60%	TBD	79%	TBD
One to One TextCare		Virtual	80%	78%	71%	--	76%	Yes

Client Clinic Example

THE NEED

- **69%** of employees & spouses with ≥1 chronic condition
- Low preventive care compliance
- Poor care coordination
- Onsite clinic delivering limited impact

THE SOLUTION

- **Vital Incite** to identify risk & gaps
- **Plan design incentives** tied to wellness (premium reductions)
- **Strategic clinic partner** aligned to outcomes

THE RESULTS

- **+48%** wellness exam compliance
- **–22%** pharmacy spend
- Onsite clinic became a **medical home**, expanding services & engagement

Cardiometabolic Vendors

- Overview
  - Focus on cardiometabolic conditions
  - Prevent, manage, and improve health outcomes
  - Combine digital tools and lifestyle interventions
  - Access to health coaches, dietitians, or nurses
  - Use messaging, video visits, and structured programs
  - Operate independently or through TPA

- Considerations
  - High chronic condition prevalence
  - High-risk membership
  - Cardiovascular/Endocrine as top cost drivers
  - High percentage of type 2 diabetes with complications
  - Poor biometric migrations

Cardiometabolic Vendor Differentiators

	Data Limitations	Diabetes Engagement	Hypertension Engagement	Blood Pressure Values	Blood Pressure Control	A1c Values	A1c Control	Risk Control	Recommendation
Omada Health (Direct)	Yes- TPA	4%	2%	67%	77%	13%	100%	76%	Yes, with Strong Engagement Strategy
Teladoc (Livongo)	Yes	21%	16%	55%	84%	48%	77%	72%	
Onsite Health Coaching		35%	37%	86%	92%	75%	100%	83%	Yes

Strong Concept, No Data to Support

Vida Health
Modify Health
Abacus Health
Nudj Health
Pivio Health
Omada Health via Carrier (Diabetes, Hypertension)

Do Not Recommend

Diathrive Health
Virta Health
DarioHealth
Twin Health
Omada Health via Carrier (Prevention)

Client Health Coaching Example

STRATEGY

- Culture of health & wellbeing
- Data-driven population insights
- Preventive care incentives
- Dedicated health coach

WHAT CHANGED

- Physical incentive program
- Proactive risk identification
- Early condition detection
- Targeted outreach to high-risk members

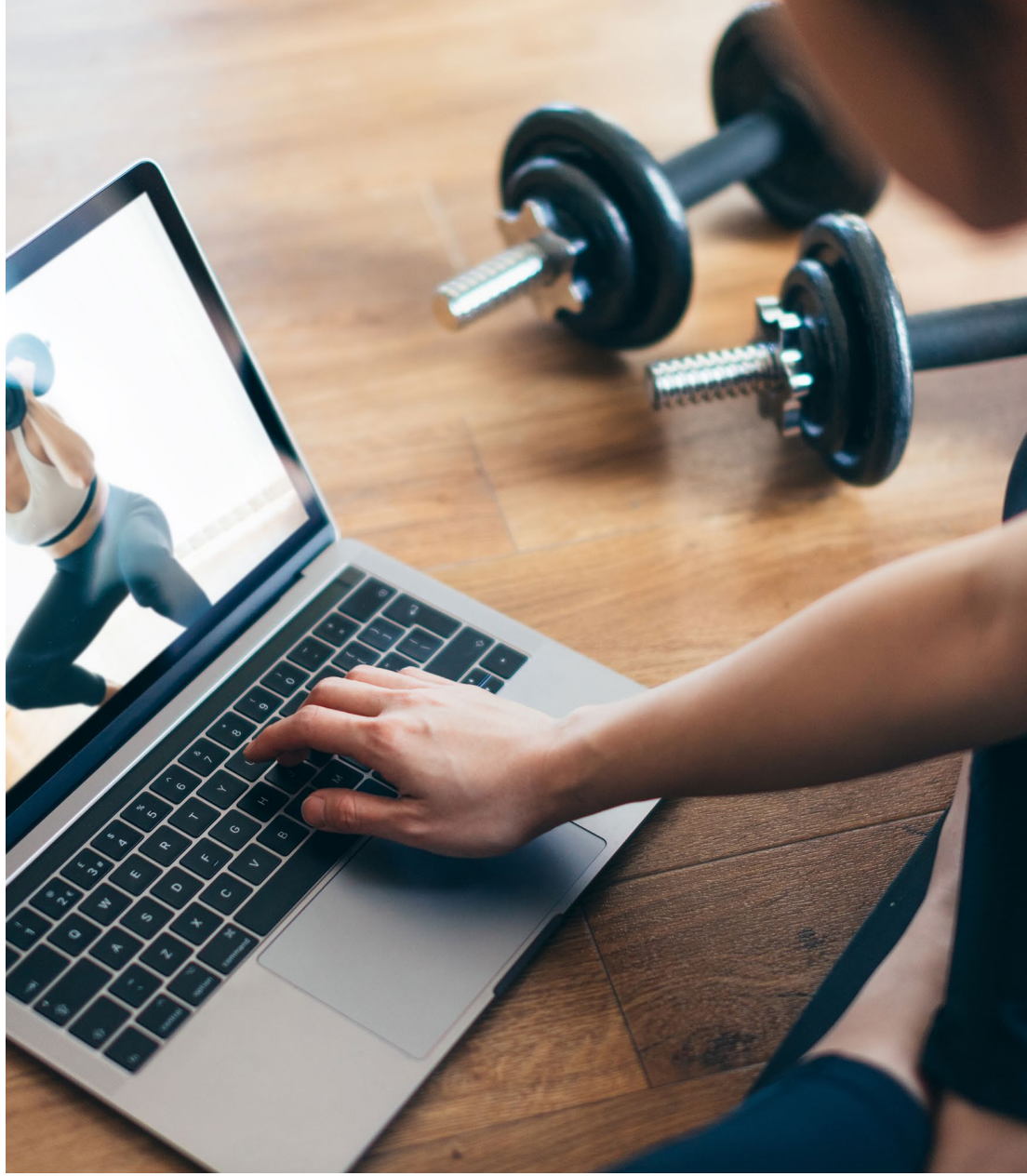
RESULTS THAT MATTER

- **87% physical compliance**
- **67% mammogram compliance**
- **Lower spend** in MSK, cardiovascular, GLP-1 categories
- **$12K PMPY savings** per participant improving risk
- Health plan outperforms benchmark **year over year**

Musculoskeletal Vendors

- Root Cause
  - Incident rate
  - High-cost MSK-related services
  - Poor preventative care
  - Age

- Considerations
  - High-cost surgeries
  - Low-quality providers driving cost
  - Rehab Management/Work Comp Strategy
    - Virtual vs. Onsite
    - Early Intervention Key
    - Ergonomic Assessments
    - Job Function Matching Evaluation



Musculoskeletal Vendor Differentiators

	Model	Clinical Approach	Care Navigation	Engagement (Members with MSK Dx)	Data Availability	MSK Spend Trend	Recommendation
Hinge Health	Digital MSK with PT Coaching Technology	Protocol-Driven Coaching PT Oversight	Triage (Hinge Select)	5%	Yes (via TPA)	-35%	
Sword	AI-Driven Digital PT Motion Tracking Dedicated DPT	Structured PT with AI Adjustment	No	4%	Yes (Direct)	+25%	
Aware Health	Virtual Telehealth PT	Individualized Diagnosis-Driven	Triage	6%	Yes (Direct)	+117%	Yes, with VI approved PGs
Ascension	**Onsite** PT or ATC	Individualized Diagnosis-Driven	Triage	42%	Yes (Direct)	+68%	Yes

Performance Guarantees (PGs)

Clinic PGs

Vital Incite Performance Guarantee Analysis
~Sample Organization~

Performance Goals	Performance Definitions
Engagement and Care Coordination	
Maintain or Improve satisfaction with using clinic services	Percent of individuals who remain engaged in the clinic (satisfaction).
Maintain or Improve wellness exam compliance	Percent of ENGAGED POPULATION in PREVIOUS PERIOD are compliant with WELLNESS EXAM (PROCEDURE) in current calendar year
Maintain or Reduce Avoidable ER visits for those that engage in the clinic services	Count of AVOIDABLE ER VISITS in the RISK PERIOD per 1,000 ENGAGED members
Pharmacy Management	
Maintain or improve efficient use of medications in controlling HTN	Percent of ENGAGED POPULATION who are ID'ed with HYPERTENSION spending >= $50 per month on Cardiovascular Medications.
Maintain or improve efficient use of medications in controlling Diabetes	Percent of ENGAGED POPULATION who are ID'ed with DIABETES spending >= $500 per month on Endocrine-Diabetic Medications.
Chronic Condition Control	
Maintain or improve the control of blood pressure for those that engage in the clinic	Percent of ENGAGED POPULATION from PRIOR ENGAGEMENT PERIOD have a controlled BP range <= 140/90.
Maintain or improve the control of blood sugars for those that engage in the clinic	Percent of ENGAGED POPULATION whose last A1c in the PRIOR ENGAGEMENT PERIOD >=7.0 , who reduce their level by 1% or <7 in CURRENT ENGAGEMENT PERIOD
Maintain or improve A1c testing compliance for diabetics engaged in the clinic	Percent of ENGAGED POPULATION who are ID'ed with DIABETES in RISK PERIOD and have 2 or more A1C TEST (PROCEDURE) in the measurement year.

Purpose

- Year 1 - Focused on engagement, care coordination, and chronic condition control
- Year 2+ - Focused on retention, care coordination, chronic condition management (biometrics), Rx management

Cardiometabolic Vendor PGs

Vital Incite Performance Guarantee Analysis

Performance Goals	Performance Definitions
Engagement	
Engagement of members with risk factors for cardiometabolic conditions	Percent of population with pre-diabetes, Type 2 diabetes, hypertension, lipids disorders, and obesity engage with program
Chronic Condition Control	
Pre-diabetes control	Percentage of Engaged Population with A1c 5.7-6.4 at baseline will not progress to A1c <6.4 at end of measurement period
Reduction in A1c	Percent of Engaged Population with A1c > 7.0 at baseline will reduce A1c by 1% or more at end of measurement period
Reduction in LDL Cholesterol	Percent of Engaged Population with LDL >100 at baseline will reduce LDL cholesterol =<100 at baseline
Reduction in Blood Pressure	Percent of Engaged Population with BP >= 140/90 at baseline will BP < 140/90 at baseline
Reduction in BMI	Percent of Engaged Population with BMI >=25 at baseline will weight by 8% or more in year 2
Reduction in Cholesterol Lowering Medications	Reduction in total cost PMPM for Engaged Population at end of measurement period compared to baseline
Reduction in BP Lowering Medications	Reduction in total cost PMPM for Engaged Population at end of measurement period compared to baseline
Reduction in Diabetes Medications	Reduction in total cost PMPM for Engaged Population at end of measurement period compared to baseline
Reduction in Weight Management Medications	Reduction in total cost PMPM for Engaged Population at end of measurement period compared to baseline

Purpose

- Engagement among members with cardiometabolic conditions
- Condition control through improved biometric values
- Rx management
- Reduced healthcare spend
- Reduced ER/inpatient stays for a primary diagnosis related to a cardiometabolic condition

Request for Proposal (RFP)

RFP Process

- Client background, purpose, goals
- Terms and conditions
  - Minimum qualifications of vendor
  - Method of award
  - Amendment
  - Subcontracting
  - Negotiations
- Mandatory Requirements for Proposal Acceptance
- Evaluation Criteria
- Deadlines
- Confidentiality

Client RFP Example

EMPLOYER CHALLENGE

- Poor onsite clinic outcomes
- High regional healthcare costs
- Limited high-quality provider access
- RFP required to identify a viable long-term solution

THE SOLUTION

- Vital Incite led RFP
- Hospital-Owned Provider Selected
  - Stability
  - Broad clinical infrastructure
  - Comprehensive model
- PGs and Engagement designed to drive utilization and outcomes
- Data Driven Targeting
  - Proactive outreach lists

RESULTS THAT MATTER

- **+9% engagement trend**: **80%** of moderate–very high-risk members engaged
- **~$15K PMPY savings**: High/moderate risk shifts vs. community providers
- **Physical compliance**: **54% → 72%**
- **Total plan paid PMPY**: **–14% (2022–2024)**

Questions?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