

# Case Study:

## Financial services client saves \$1.8M by supporting high-risk members with care management

Looking to get their rising healthcare spend under control, this mortgage lender ranked as one of Fortune's best companies to work for, partnered with Premise Health to leverage a data-driven approach with care management. By identifying population segments driving a majority of cost and providing the right care, the organization saw large savings and improved clinical outcomes.

### The Challenge

With six in 10 American adults now living with chronic conditions, and four in 10 having two or more<sup>1</sup>, employers are feeling the strain. Recognizing the rising impact of chronic conditions on population health and employer healthcare spend<sup>2</sup>, this organization set out on a mission: to identify and support to their members managing complex conditions, reduce their highest drivers of medical spend, and ultimately foster a healthier, more engaged workforce.

### The Solution

Focused on improving outcomes and reducing costs, the client partnered with Premise to take a more proactive approach by implementing a care management solution. After using claims data to identify and engage members who are high-cost year over year, care managers built trusted relationships and developed personalized care plans to help members get their chronic conditions back to manageable levels. Using evidence-based lifestyle modifications tailored to the individual, care management helps address, improve, and in some cases reverse the health effects of chronic conditions.

### Partnership Keys to Success

- > Open dialogue and ongoing collaboration between Premise and employer leadership
- > Access to a full suite of advanced primary care services, including 24/7 on-demand virtual care
- > \$750 member incentive to activate a My Premise Health account, driving 90% engagement from eligible population
- > Mutually approved member engagement strategy, and promotional campaign

## The Outcome

Through more proactive clinical support and customized treatment plans, the organization realized an estimated **\$1.8 million in annual savings**, or **an average savings of \$6,161 per enrolled panel member per year**<sup>3</sup>.

These savings nearly doubled when examining only the top portion of high-risk care management panel members, who saved **\$12,129 per member per year**.

As for what's driving those savings? We know they're partially driven by increased utilization of cost-effective primary care in lieu of urgent and emergent types of care. Notably, the top 2% of high-cost, high-risk panel members drove 21% of wellness center visits.

Beyond savings, members with chronic conditions saw a positive impact on their health. 69% of enrolled members managing hypertension and 68% of enrolled members managing diabetes went from uncontrolled to controlled status<sup>4</sup> within the first year. Members with these conditions were also 10 to 20% more likely to have received clinically appropriate screenings and adhere to medication without gaps than a community managed comparison group.

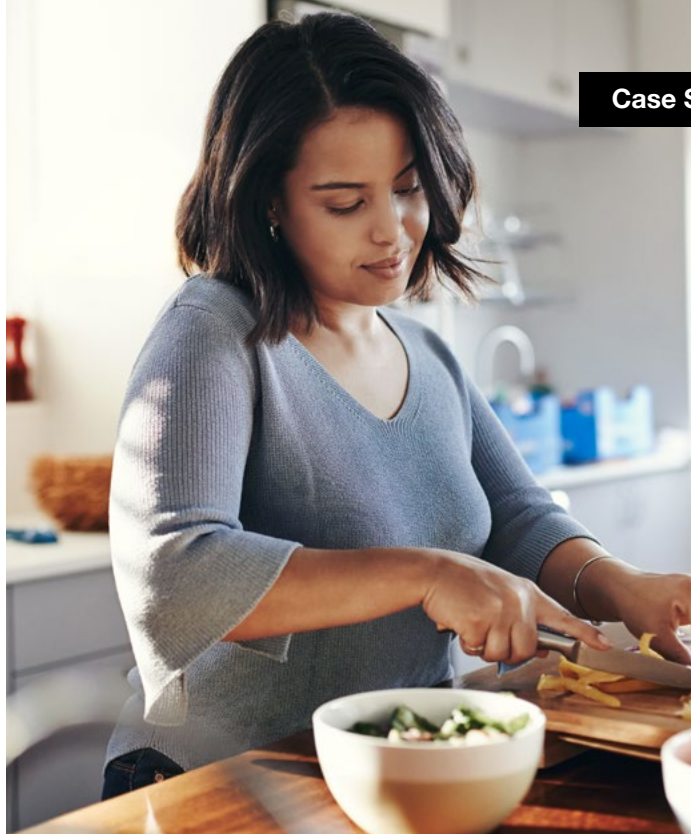
Through the implementation of care management, members were able to better manage their health by utilizing more preventive care services and less urgent and emergent care when compared to a community managed control group. In the first year, care management panel members reported:

**23% more** office visits with 71% higher preventive office visits

**30% less** outpatient surgery

**54% less** urgent care visits

\*Risk adjusted utilization rates



Programs that allow providers to engage complex members can play an important role in helping employers maximize their healthcare dollars and resources. Today, this client continues to support high-risk members that need care the most and prioritizes a culture of wellbeing, and the accolades speak for themselves; not just any organization is ranked as one of Fortune's best companies to work for two decades and counting. Their partnership with Premise Health will continue to evolve as both organizations pursue innovation on how healthcare is accessed and experienced across the country.

<sup>1</sup>Centers for Disease Control and Prevention. (2024). About chronic diseases. U.S. Department of Health and Human Services. <https://www.cdc.gov/chronic-disease/about/index.html>

<sup>2</sup>Centers for Disease Control and Prevention. (2024). Chronic disease data, research, and facts. [https://www.cdc.gov/chronic-disease/data-research/facts-stats/?CDC\\_AAref\\_Val=https://www.cdc.gov/chronicdisease/about/costs/index.htm](https://www.cdc.gov/chronic-disease/data-research/facts-stats/?CDC_AAref_Val=https://www.cdc.gov/chronicdisease/about/costs/index.htm)

<sup>3</sup>Total program savings are calculated on an annual basis (October 2019-September 2020)

<sup>4</sup>Controlled status defined as members managing hypertension with a blood pressure less than 140/90 and members managing diabetes with an HbA1c of less than 8%

Let's talk about what you need, and how we can help.

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