

REDUCE COSTS:

Navigating with New Information







Reduce Costs

Contain costs for organizational well-being



Improve Care

Improve the care experience for *member well-being*



Make It Easy

Simplify the benefit journey for everyone's well-being



WHERE HAVE WE BEEN?



Where Have We Been?

For 25 years, PPOs did the navigation for us

We trusted networks to:

- ► Enroll high-quality providers
- Negotiate the best prices
- ► Ensure value

They diluted our expectations:

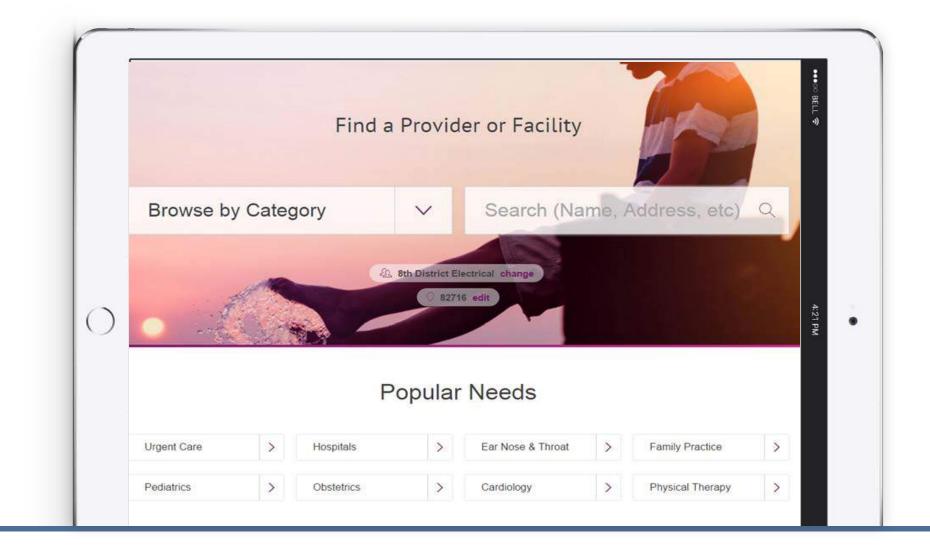
- Developed homogenous networks
 - Most include nearly 100% of all hospitals into their networks
 - Most physicians included
 - Any willing provider statute that mandates provider access to PPO's if they meet the credentialing requirements

Was our trust warranted?



Static Navigation

(THE OLD-FASHIONED WAY)









WHERE ARE WE HEADED?



Where Are We Headed?

Most exciting time in 25 years in this business!











Proactive Navigation

Defined as the practice of directing members to highest quality, lowest cost providers

Early example: Transplant networks

- Extremely high-cost procedures
- Motivation was high to control quality/cost
- COEs achieved remarkable results



THIS IS HOW WE IMPACT COST



Trends We Are Changing

Bend the curve on problematic trends



DATA USED IN REFERRALS



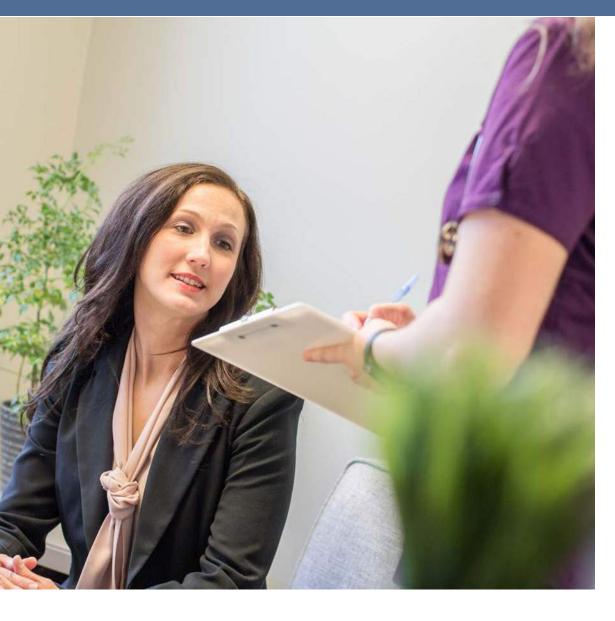
Adverse events, poor outcomes, & preventable readmissions



HUGE PRICE VARIATIONS ACROSS PROVIDERS







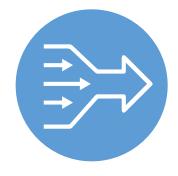


Navigating the Path for High-Value Healthcare





What is it?



SIMPLE, YET
POWERFUL PROGRAM



COST
TRANSPARENCY TOOL



MEDICAL
CONCIERGE SERVICE





What does it do?



NAVIGATE MEMBERS TO HIGH-QUALITY, LOWER-COST PROVIDERS



IMPROVES OUTCOMES



LOWERS COST TO MEMBER AND PLAN





STEP 1:

Member connects
with EBMS before an
expected surgery

STEP 2:

A miChoice navigator presents quality & cost data for each possible facility

STEP 3:

The navigator coordinates clinical & financial details (and handles travel arrangements if necessary)

STEP 4:

A miChoice nurse case manager coordinates all follow-up care



The miChoice Ranking System

QUALITY + COST = VALUE

Hospital Name	•	COST		· QUALITY		•	
	miChoice Cost- Quality Ranking	Targeted Payment	. Medicare	State Percentile	National Percentile	Patient Responsibility	Facility Selection
Swedish Covenant Hospital • Chicago, IL	A +	\$51,432	\$33,955	86%	88%	\$0	Proposed
Northwestern Memorial Hospital • Chicago, IL	A	\$55,549	\$37,032	79%	80%	\$0	Proposed
Saints Mary and Elizabeth Medical • Chicago, IL	A	\$52,278	\$34,852	69%	70%	\$0	Proposed
Resurrection Hospital Chicago, IL	В	\$53,067	\$35,378	45%	50%	\$4,800	
Rush University Medical Center • Chicago, IL	В	\$67,376	\$44,917	87%	83%	\$4,800	
Advocate Illinois Masonic Medical • Chicago, IL	С	\$62,071	\$41,381	44%	47%	\$6,000	Planned
The University of Chicago Medical • Chicago, IL	С	\$67,683	\$45,122	50%	53%	\$6,000	
University of Illinois Medical Center • Chicago, IL	D	\$75,439	\$50,293	48%	52%	\$6,000	
Mercy Hospital & Medical Center • Chicago, IL	D .	\$59,108	\$39,405	23%	27%	\$6,000	
Mount Sinai Hospital Chicago, IL (Out Of Network)	. E	\$62,022	\$41,348	15%	17%	\$6,000	



Bundled All-Inclusive Procedures

PRE-OP

Consultation Lab Work

SURGERY

Anesthesiologist Fees

Surgeon Fees Pathology

Facility Fees Implants/Hardware

POST-OP

Follow Up Visit

DME (durable medical equipment)

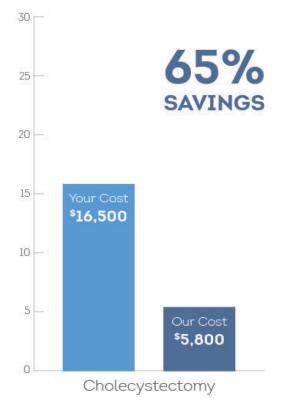


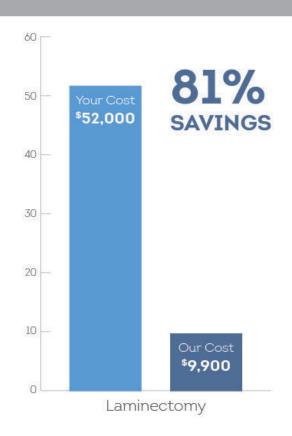
Surgery Cost Containment

TOP PROCEDURE COST COMPARISON

See what our **HIGH PERFORMANCE** Network of Doctors & Facilities can do for **YOU!**









KEYS TO SUCCESS



Increase Engagement

DELIVERED THROUGH miChoice, UM, CM, ADVOCATE



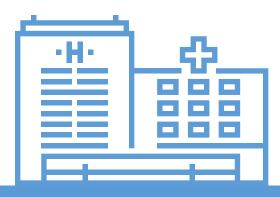
EARLY ENGAGEMENT

- Risk score
- Facility/physician pairing



ENGAGE AND INCENTIVIZE

 Reward the patient for choosing high value



EDUCATE



PRE-CERT

- All planned inpatient and surgical outpatient
- Engage/educate patients on options



COORDINATE

 With physician to move the procedure to A or A+



COORDINATE

 Travel and care for members who must travel outside their primary location



Incentive Recommendations

SPD LANGUAGE AVAILABLE

WAIVING OUT-OF-POCKET

No Copayment Or Deductible

For choosing A+ or A providers

BENEFIT DIFFERENTIAL

Tiered
Reimbursement
Schedule

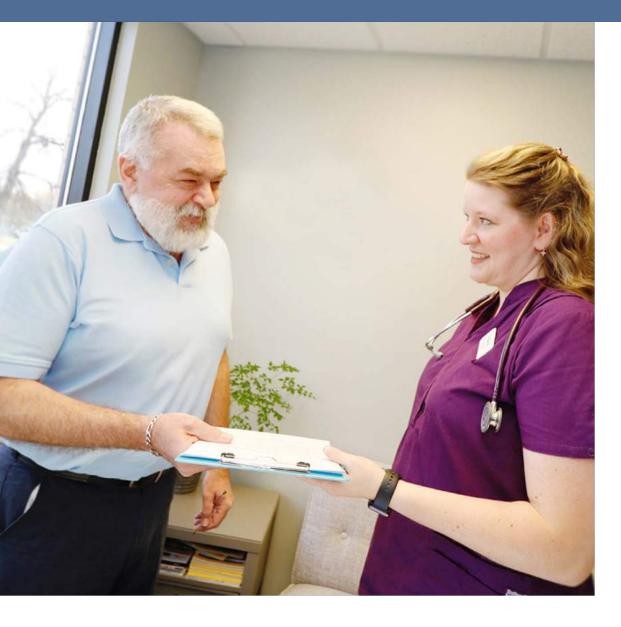
Value based benefit schedule

HSA CONTRIBUTION

Employer Contribution To HSA

For A+ or A providers not to exceed \$599.99





Case Study

A miChoice Success Story!







Reduce Costs

Contain costs for organizational well-being

Bundled, direct contracted rates



Improve Care

Improve the care experience for *member well-being*

Exposure to high-quality providers

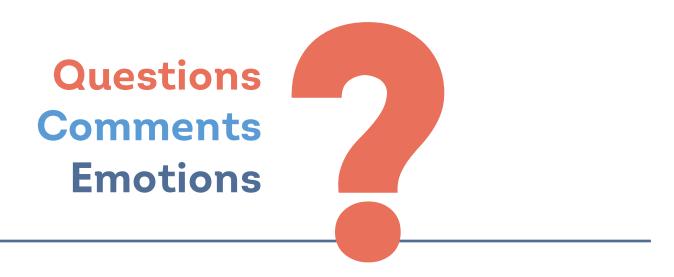


Make It Easy

Simplify the benefit journey for everyone's well-being

With proactive navigation





MIKE TRENT, REGIONAL VICE PRESIDENT OF SALES

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THANK YOU

