



# EXECUTIVE REVIEW

Eversight  
May 18<sup>th</sup>, 2021



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## 2021 KEY FINDINGS

- Despite the challenges with COVID-19, **57%** of the Eversight population screened with the group achieving a **higher** than average **health score** when compared to other Strive customers
- **Moderate risk** on an **aggregate level** was reported for **BMI** which is a risk factor for obesity, heart disease, and diabetes
- **87%** of Eversight participants score in the **Ideal or Low** risk range compared to 75% of Strive customers
- **88% of repeat participants** remained in ideal/low and/or made a positive risk migration
- **Approved care** for those who **did not screen** was **\$1,233 higher** than those that did screen
- **Care cost** is generally **lowest** amongst the screened population scoring in the **Ideal** category
- Extremely **low care cost** for those with **poor risk scores** presents future catastrophic risk to the plan due to a **lack of health condition management**
- **Annual wellness visit** utilization is best seen in the **female screened population** with a high percentage of **males**, screened and unscreened, **not having an annual physical**
- **Care cost** for the **diabetic** and **hypertensive** population is consistently **higher** than those without those conditions
- **Positive trend** is seen in blood glucose aggregate results
- **12%** of participants tested positive for tobacco use with **40%** of participants indicating an interest in quitting in their 2021 Health Risk Assessment

# 2020 EMPLOYEE EVENTS

## HEALTH SCREENINGS

- December 2020 & January 2021

## WELLNESS PRESENTATIONS

- February – Aging & Your Health
- August – Oral Health by Delta Dental
- October – Jog Your Memory

## WELLNESS CHALLENGES

- 2<sup>nd</sup> Annual Kapnick Strive Corporate Challenge
- The Beat Goes On
- Amazing America
- Healthy Brain
- Mini-Month Madness Nutrition

## STRIVE REWARD POINTS PROGRAM

- Quarterly and annual raffles





# TOTAL PARTICIPATION

66 REPEAT PARTICIPANTS



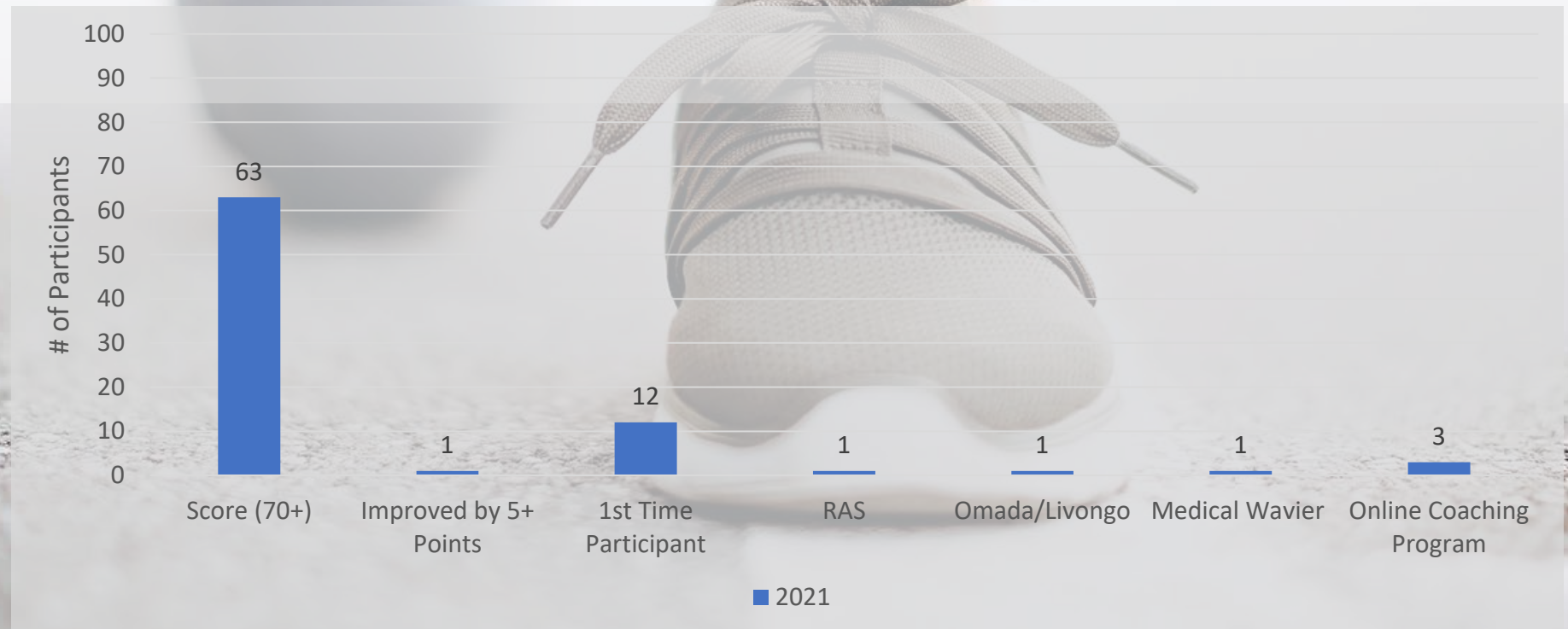
YEAR	TOTAL PARTICIPATION	% OF EE Participation	AVG HEALTH SCORE
2021	83	57%	84
2020	-	-	-
2019	93	66%	87.5
2018	101	63%	84
2017	79	49%	83
2016	100	61%	79

# WELLNESS INCENTIVE BREAKDOWN

## Incentive Structure:

\$500 premium deduction applied to paycheck

If coverage is waived – the \$500 is applied to wavier dollars





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# PROGRAM OUTREACHES

## CRITICAL VALUES

- There were no critical values reported in 2021

## HEALTH COACHING

- 60 or below: 5 participants scored 60 or below
  - A health coach was able to connect with 4 out of the 5 participants
- RAS health coaching program: 8 eligible
  - 1 participant has completed the program
- Omada/Livongo
  - 2 participants have completed 6 weeks of the Omada program for incentive eligibility

# BIOMETRIC AVERAGES

Biometric	Average Result	Strive AVG	Ideal Range
Health Score	84	79	70 - 100
BMI	30.8	29.8	18.5 - 29.9
Waist/Hip Ratio	0.89	0.91	<= 0.95
BP: Systolic	117	120	≤121mmHg
BP: Diastolic	75	76	≤81mmHg
Total Cholesterol	189	187	<200mg/dL
HDL Cholesterol	60	54	≥50
LDL Cholesterol	106	107	<=129
Triglycerides	112	131	<150
Blood Glucose	92	100	≤100mg/dL
Hemoglobin A1C	5.0	5.5	<5.7%
Average Age	41	47.8	

\* Strive AVE Benchmarking reflects data for all Kapnick Strive Biometric Clients ~3,000



## AVERAGE SCORE – 84

Ideal = 100-85

Low Risk = 84-70

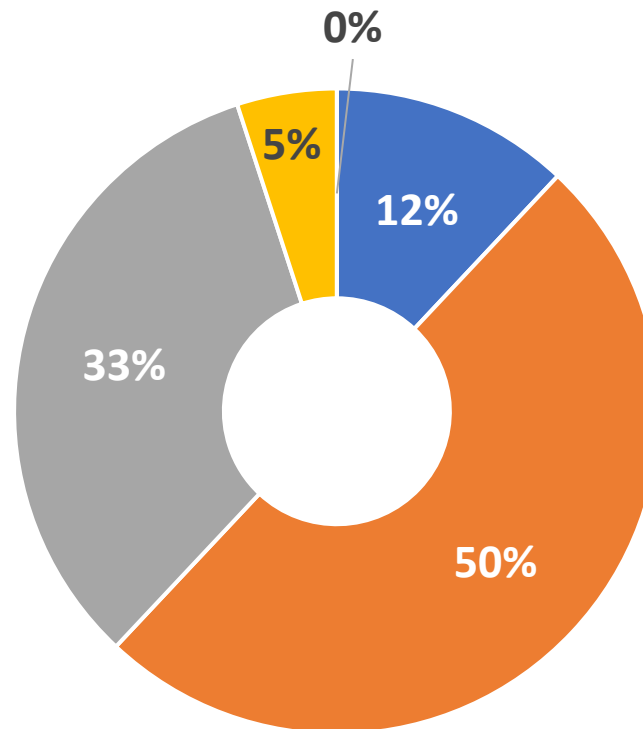
Moderate Risk = 69-60

High Risk = 59-50

Very High Risk = 49-0

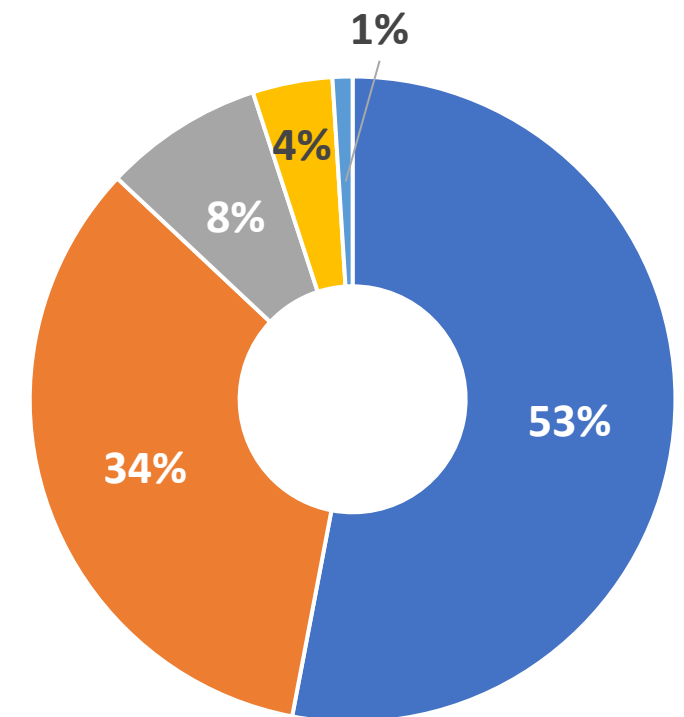
# SELF-PERCEPTION VS ACTUAL HEALTH

SELF-PERCEPTION OF HEALTH



■ Ideal ■ Low ■ Moderate ■ High ■ Very High

ACTUAL HEALTH SCORE



■ Ideal ■ Low ■ Moderate ■ High ■ Very High

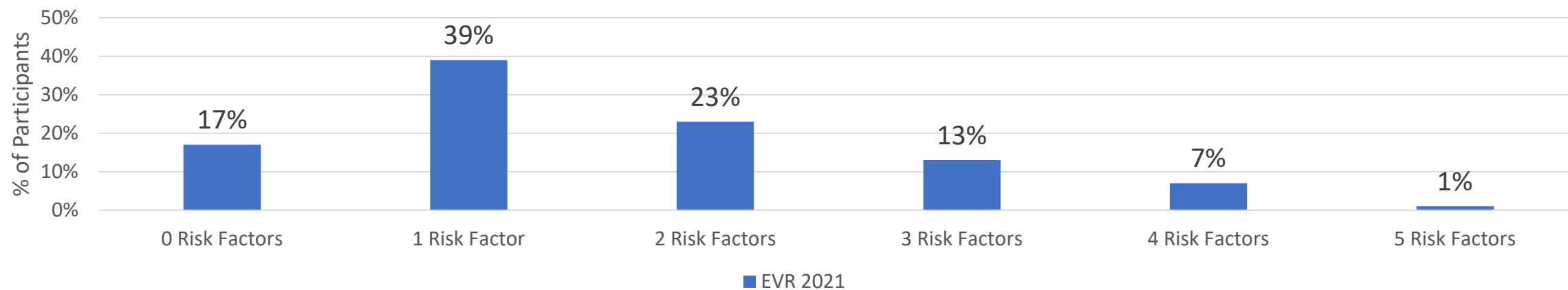
# HEALTH SCORE BENCHMARKING





# METABOLIC SYNDROME RISK

## Prevalence of Metabolic Syndrome – 3 or more risk factors





## REPEAT PARTICIPANT RISK CHANGE

**REMAINED IDEAL/LOW  
AND/OR MADE  
POSITIVE RISK  
MIGRATION**

58  88%

**REMAINED MODERATE  
OR HIGH/V HIGH**

4  6%

**MADE A NEGATIVE  
RISK MIGRATION**

4  6%






# REPEAT PARTICIPANT BIOMETRIC RISK CHANGE




## Total Cholesterol

Remained low risk or made a positive risk migration	Remained in moderate or high risk	Made a negative risk migration
43  65%	15  23%	8  12%




## Blood Glucose

Remained low risk or made a positive risk migration	Remained in moderate or high risk	Made a negative risk migration
51  80%	7  11%	6  9%




## Systolic Blood Pressure

Remained low risk or made a positive risk migration	Remained in moderate or high risk	Made a negative risk migration
46  70%	7  10%	13  20%




## Hemoglobin A1C

Remained low risk or made a positive risk migration	Remained in moderate or high risk	Made a negative risk migration
57  86%	5  8%	4  6%

## Diastolic Blood Pressure

Remained low risk or made a positive risk migration	Remained in moderate or high risk	Made a negative risk migration
54  82%	2  3%	10  15%

## Tobacco

Remained low risk or made a positive risk migration	Remained positive	Made a negative risk migration
58  88%	6  9%	2  3%

# TOP RISK FACTOR

HEART  
HEALTH



BODY  
COMPOSITION



CHOLESTEROL

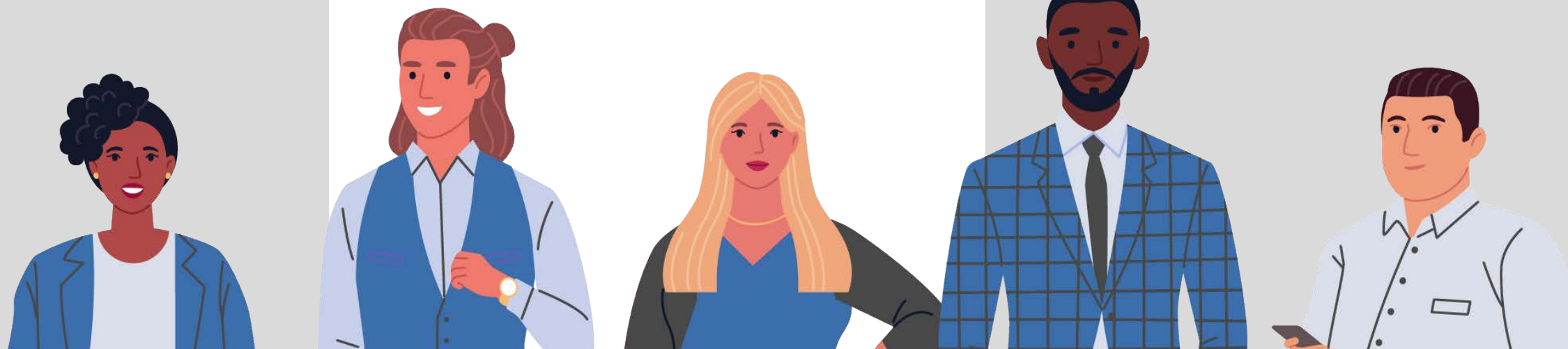




## STAND-OUT-STATS & STORIES

Participant A: Moved from high risk to moderate risk by losing 10 pounds and improving their Hemoglobin A1C!

Two participants that tested positive for nicotine in 2019 tested negative in 2021!



**13 PARTICIPANTS RECEIVED A HEALTH SCORE OF 100**



COMORBIDITIES &  
CLAIMS



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# CHRONIC CONDITION CLAIMS INTEGRATION

## TOTAL COST AND PMPM WITH AND WITHOUT CHRONIC CONDITIONS

	Total Allowed Amount	Total Allowed with Chronic Conditions	Eversight PMPM without Chronic Condition Indicator	Eversight PMPM with Chronic Condition Indicator	PMPM without Chronic Condition Indicator Benchmark	PMPM with Chronic Condition Indicator Benchmark
Aggregate	\$981,562	\$454,970	\$215	\$527	\$186	\$756
Employee	\$541,009	\$220,326	\$228	\$969	\$169	\$707
Spouse	\$278,876	\$153,526	\$216	\$580	\$257	\$920
Child	\$161,677	\$81,415	\$188	\$427	\$134	\$572

- Adults age 19+: 148 Employees. 59 Spouses. 39 Children. 246 Total. Average age: 39
- One large claimant with chronic conditions with \$118,517 in approved claims removed
- Benchmarking reflects cohort data for all Kapnick Lens Customers: 42,428 adults. Average Age: 42
- Benchmarking includes all claimants age 19+ regardless of approved claim level (large claimants not excluded)
- Time period for benchmark and client allowed claims is paid from March 2020 through February 2021 (Medical/Rx combined)
- Chronic condition indicator includes Asthma, COPD, Congestive heart failure, Diabetes, ESRD, HIV, Hypertension, IBD, CKD, Parkinson's, Rheumatoid Arthritis, & Sleep Apnea

# POPULATION QUALIFICATIONS

Member Type	Employees
Screened	73
Screened & Enrolled all 12 Months Age 19+	62
Screened with Approved Claims	57
Did Not Screen	41
Did Not Screen & Enrolled all 12 Months Age 19+	36
Did Not Screen with Approved Claims	35
% Screened w/ 0 claims	8%
% Did not Screen w/ 0 claims	3%
% Total w/ 0 claims	6%

## Assumptions

- Considered individual employees who were eligible to participate in the health screenings offered in 2020-2021 and remained active in the Strive portal as of February 2021
- Represents claims paid from March 2020 through February 2021
- Demographic data utilized to match individuals to deidentified number in Kapnick Lens
- Using the individual deidentified number, allowed amounts approved for claims were obtained (negates plan design, quantifies value of care)
- Allowed claims may not result in member cost share if care is covered in full (preventive medical and Rx , screenings, immunizations, contraception, COVID, etc.)
- Only 73/84 screened members matched with member IDs in the Lens platform. Several members screened but were not enrolled in the medical plan, and Innovu was unable to match a few members to Eversight member IDs based on census information (this occurs for all clients).

## APPROVED CLAIM RESULTS

Member type	Allowed Amt	Count	Avg Amt/Mem
EE Screened	\$214,857	73	\$2,943
EE not Screen	\$171,229	41	\$4,176
Difference in Approved Care			\$1,233

- Average Medical/Rx approved claims by screened and not screened population for claims paid from March 2020 through February 2021
- One large claimant who did not screen with \$118,517 in approved claims removed



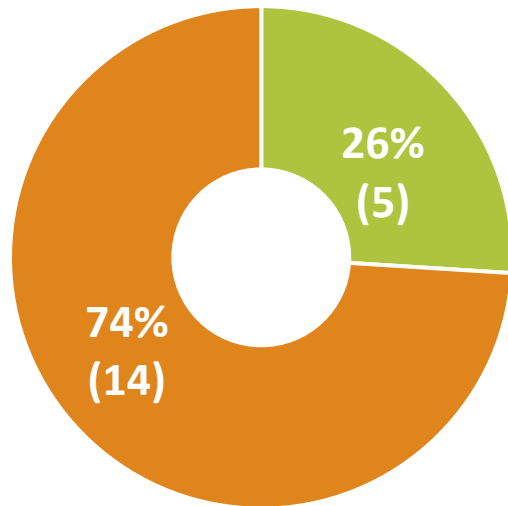
## ALLOWED AMOUNTS BY RISK SCORE

Participating Employee/Spouse	Medical/Rx Allowed Amount	Member Count	Claims Per Member
85 - 100	\$104,335	38	\$2,746
70 - 84	\$86,654	25	\$3,466
60 - 69	\$108,864	7	\$15,552
50 - 59	\$1,739	3	\$580
49 and below	\$1,217	1	\$1,217
Total	\$214,857	73	\$2,943

- Approved Medical/Rx allowed amount by health score range amongst screened members enrolled in February 2021
- Represents claims paid from March 2020 through February 2021
- One member in the 60-69 range with an autoimmune condition has \$87,592 in approved claims.  
Total w/o this member: \$20,912. Per member: \$3,485.

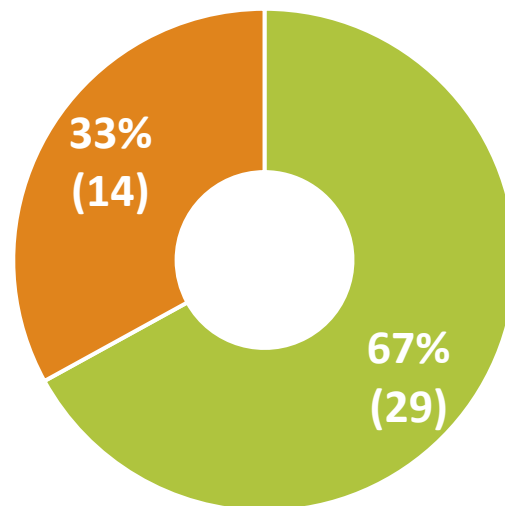


SCREENED MALES



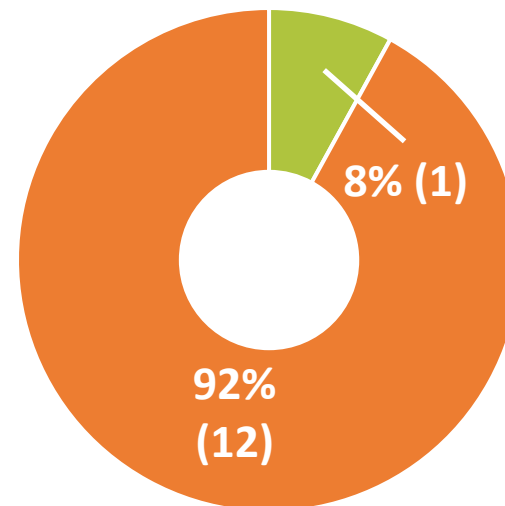
■ Wellness Visit ■ No Wellness Visit

SCREENED FEMALES



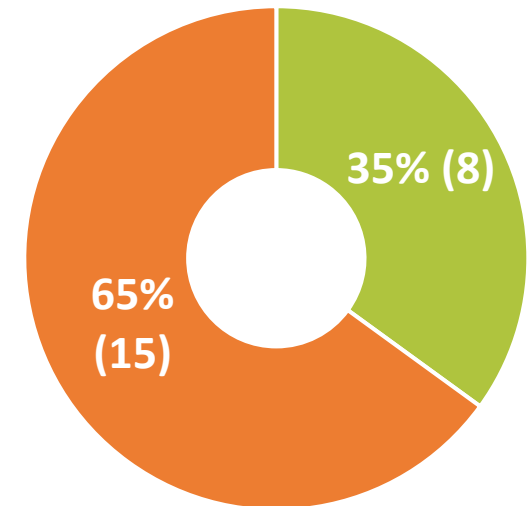
■ Wellness Visit ■ No Wellness Visit

NON-SCREENED MALES



■ Wellness Visit ■ No Wellness Visit

NON-SCREENED FEMALES



■ Wellness Visit ■ No Wellness Visit

- Considered individual employees who were eligible to participate in the health screenings offered in 2020, remained active in the Strive portal as of February 2021, are age 19+, and were enrolled for all 12 of the past 12 months.
- Demographic data utilized to match individuals to deidentified number in Kapnick Lens
- Assumes procedure codes for adult routine physical examination medical visit of 99385-99386 and 99395-99396 (new and established patients respectively)
- Based upon claims data incurred January 2020– February 2021 and paid through February 2021 (mature 12 months of incurred service dates)



# GAPS IN CARE – Lens Data

Diabetes Member Count (enrolled full 12 months)	Members with HbA1c Screening	Members with Nephropathy Screening	Members who filled anti- diabetic drug incurred in past 14 months
15	11	10	10

- Adults age 19+ enrolled for all 12 of the past 12 months on screen eligible EE contracts: 233 Employees. 104 Spouses. 66 Children. 403 Total
- Based upon claims data incurred January 2020 – February 2021 and paid through February 2021 (mature 12 months of incurred service dates)
- Lens identifies members as diabetic when there are medical or Rx claims with at least 2 unique incurred dates with a diagnosis of Diabetes within the last 36 months





# HISTORICAL DIABETIC UTILIZATION

	Year number	2016		2017		2018		2019		2020		⚙
	Diabetes Indicator	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member	
1	False	394	\$3,839	386	\$3,765	360	\$5,491	335	\$2,807	301	\$3,274	
2	True	18	\$7,285	24	\$22,212	21	\$22,761	21	\$9,006	21	\$10,608	
	Grand Total	404	\$4,069	400	\$4,966	377	\$6,511	353	\$3,199	315	\$3,835	

KapnickLens “tags” members with a Diabetes indicator if during the current 12 month period, or 24 month period prior, 2 or more unique incurred dates are present in the claims data for either a Medical visit with a diabetes diagnosis and/or an anti-diabetic Rx was dispensed



# GAPS IN CARE – Lens Data


Hypertension Member Count (enrolled full 12 months)	Members who Filled Anti-Hypertensive Drug (incurred once in the last 14 months)
24	19

- Adults age 19+ enrolled for all 12 of the past 12 months on screen eligible EE contracts: 233 Employees. 104 Spouses. 66 Children. 403 Total
- Based upon claims data incurred January 2020 – February 2021 and paid through February 2021 (mature 12 months of incurred service dates)
- Lens identifies members with a medical claim with at least 1 incurred date with a diagnosis of hypertension within last 12 months
- Hypertensive drugs includes the following AHFS categories: Calcium Channel Blocking Agents, Diuretics, Hypotensive Agents, Alpha and Beta Adrenergic Blocking Agents





# HISTORICAL HYPERTENSION UTILIZATION

	Year number	2016		2017		2018		2019		2020 	
	Hypertension Indicator	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member	Member ID (Count Distinct)	Med/Rx Allowed per Member
1	False	380	\$3,251	375	\$4,161	355	\$5,388	330	\$2,458	298	\$3,090
2	True	49	\$8,337	49	\$8,693	41	\$13,217	44	\$7,234	38	\$7,559
	Grand Total	404	\$4,069	400	\$4,966	377	\$6,511	353	\$3,199	315	\$3,835

KapnickLens “tags” members with a Hypertension indicator if during the prior 12 month period, 1 or more unique incurred dates are present in the claims data for a Medical visit with a hypertension diagnosis



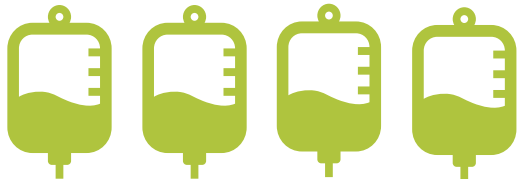
## CARE MANAGEMENT OPTIONS

### Livongo

- Provides a glucometer and unlimited blood sugar test strips, along with ongoing medical monitoring
- 4 enrolled in this program and are active on the health plan as of February 2021

### Omada

- Includes a monitored scale and digital support interface with a goal of 5-8% of sustainable weight loss
- 20 enrolled in this weight loss support program since inception. 19 are active on the health plan as of February 2021
- 14 have utilized the scale and shown weight loss
- 2 members enrolled in Omada have diabetes, 8 have hypertension, and 1 is on cholesterol maintenance Rx





CONSIDERATIONS



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# 2021 GOALS AND STRATEGIES

2021 - 2022 Focuses	Strategies
<p>Target Top Health Risks</p> <ul style="list-style-type: none"><li>• Heart Health</li><li>• Body Composition</li><li>• Total Cholesterol</li></ul> <p>Retain/increase participation</p>	<ul style="list-style-type: none"><li>• New Communication Template: quarterly wellness newsletter</li><li>• Promote free Tobacco resources via quarterly wellness newsletter</li><li>• Reminders/communication of RAS program + Omada/Livongo</li><li>• Utilize points program to promote annual well visits</li><li>• Create company-wide well-being goals to complete by end of year (Ex. Track 75 million steps within the wellness portal, lose 750 pounds company wide, etc. )</li><li>• Well-being testimonial interviews</li></ul>

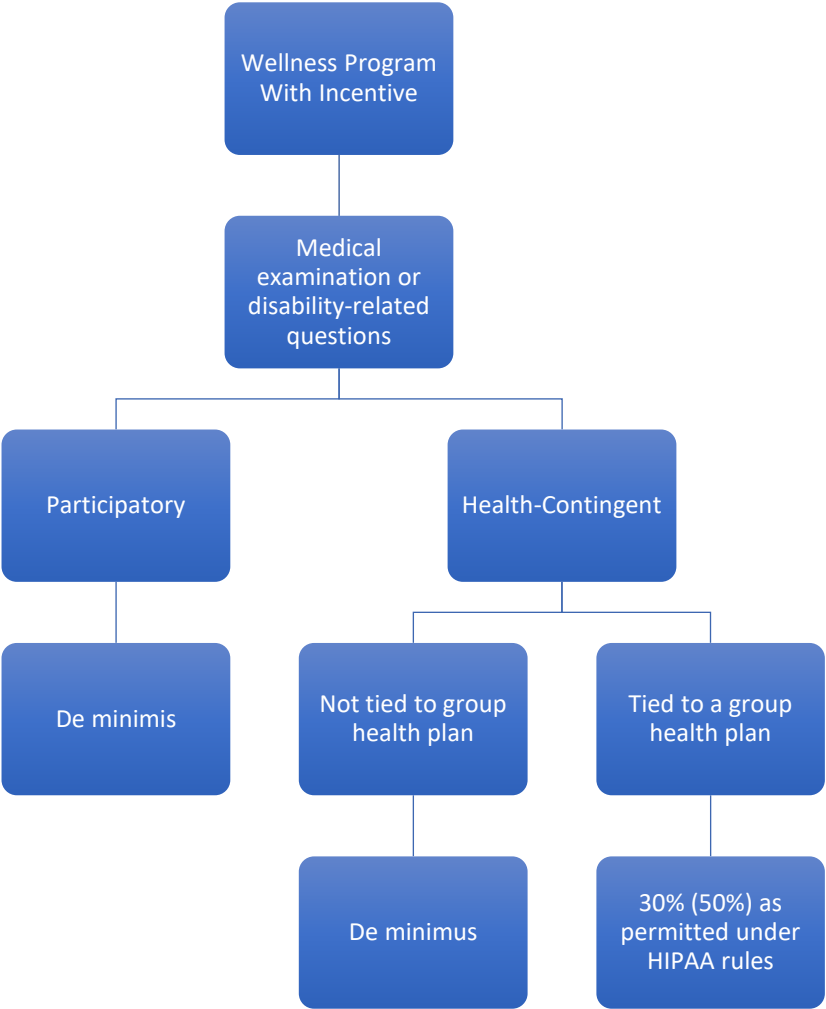


## 2021 RECOMMENDED WELLNESS INITIATIVES

Wellness Presentations	Challenges	Communications
<ul style="list-style-type: none"><li>• Decluttering</li><li>• Mindfulness Meditation</li><li>• Improving Motivation +Self Confidence</li><li>• Navigating Fad Diets</li></ul>	<ul style="list-style-type: none"><li>• 3<sup>rd</sup> Annual Kapnick Strive Corporate Challenge</li><li>• Positive Outlook</li><li>• Full Body Blast</li><li>• HIIT for 30</li></ul>	<ul style="list-style-type: none"><li>• Monthly and quarterly newsletters</li><li>• Wellness Portal Capabilities + Screening Save the Date Home Mailing in August</li><li>• Health Screening Letter Mailing in November</li></ul>

# EEOC PROPOSED RULES AND POTENTIAL IMPACTS

Potentially Impacted by EEOC Proposed Rules	Compliance Level	Incentive Structure
	Enrolled in medical plan	\$500 deduction from premium
✕	Not enrolled in medical plan	\$500 added to wavier dollars





# BIOMETRIC RESULTS



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# BIOMETRIC DESCRIPTIONS



## CHOLESTEROL

A fat-like, waxy substance found in the blood. In excess, it can form tough, fatty plaques that clog arteries, which can increase the risk of heart disease.



## BLOOD PRESSURE

Blood pressure is another main factor in determining overall heart health. Systolic pressure is the pressure in the arteries when the heart is contracting. Diastolic blood pressure is the pressure on the walls of the arteries when the heart is relaxing.



## BLOOD GLUCOSE & HEMOGLOBIN A1C

Blood glucose is sugar that the blood stream carries to all the cells in the body to supply energy. High blood glucose for a prolonged period of time can cause damage to the kidneys, eyes, and other organs. Hemoglobin A1C measures average glucose levels over a 2-3 month period and is the best predictor and indicator of diabetes.



## BODY COMPOSITION

BMI is an indicator of excess body weight. Generally, those with a higher BMI are also more likely to suffer from high cholesterol, increased blood pressure, and diabetes. BMI does have its limitations, but overall is a good indication of a serious risk.



## TOBACCO USE

Nicotine use presents a serious risk to individuals. Those who abuse tobacco not only have increased rates of cancer and other diseases, but they are more likely to miss work. The CDC estimates that tobacco use costs \$156 billion in lost productivity each year and \$170 billion in healthcare expenditures (CDC, 2017).

# BIOMETRIC DESCRIPTIONS

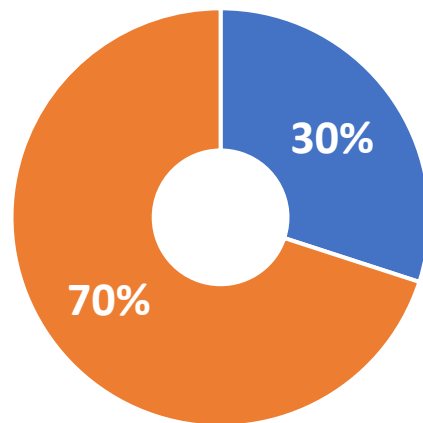
## GAMMA-GLUTAMYLTRANSFERASE (GGT)

GGT is used for diagnosing and monitoring disease of the liver, gallbladder, bile ducts and bile. Levels outside of the normal range could indicate any form of liver disease or biliary obstruction.



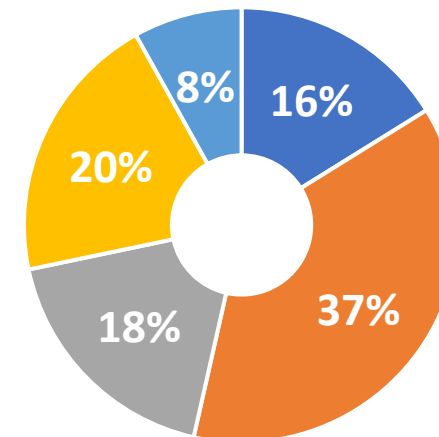
# 2021 DEMOGRAPHICS

## GENDER



■ Male ■ Female

## AGE



■ 18-29 ■ 30-39 ■ 40-49 ■ 50-59 ■ 60+

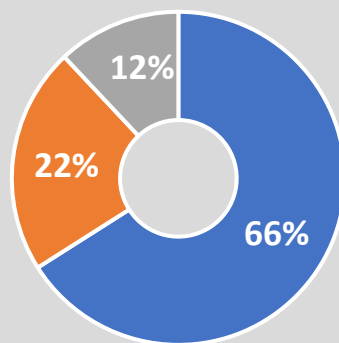
**AVERAGE - 41**



# HEART HEALTH: TOTAL CHOLESTEROL

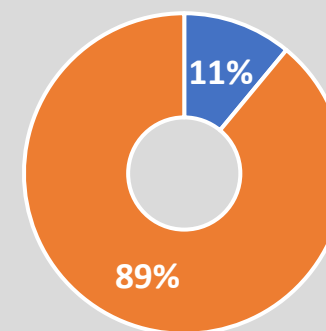
(HDL + LDL + TRIGLYCERIDES)

TOTAL CHOLESTEROL BREAKDOWN

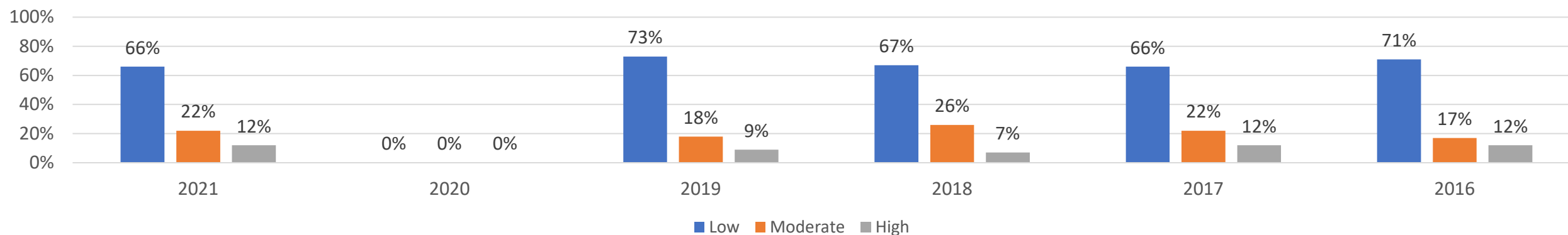


■ Low ■ Moderate ■ High

HIGH RISK AWARENESS



■ Aware ■ Not Aware

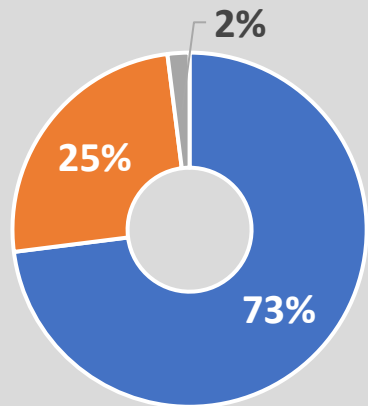




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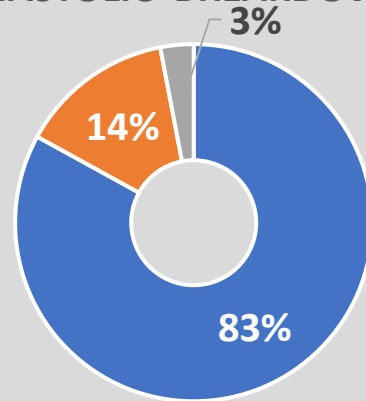
# HEART HEALTH: BLOOD PRESSURE

SYSTOLIC BREAKDOWN



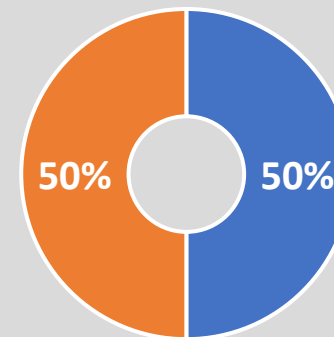
■ Low ■ Moderate ■ High

DIASTOLIC BREAKDOWN

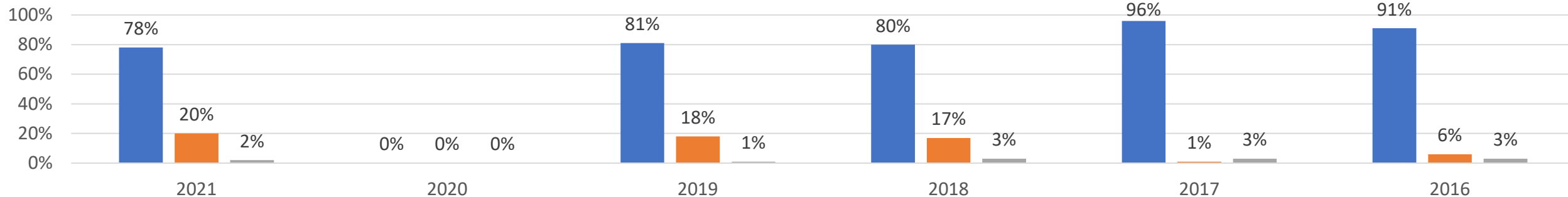


■ Low ■ Moderate ■ High

HIGH RISK AWARENESS



■ Aware ■ Not Aware

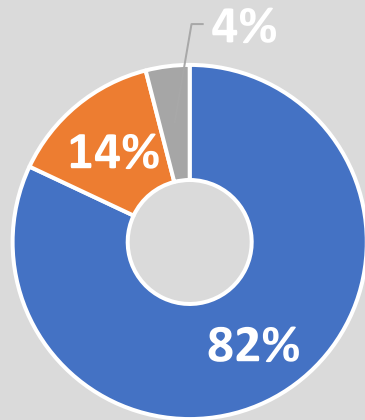


■ Low ■ Moderate ■ High

[Back to Biometric Description Page](#)

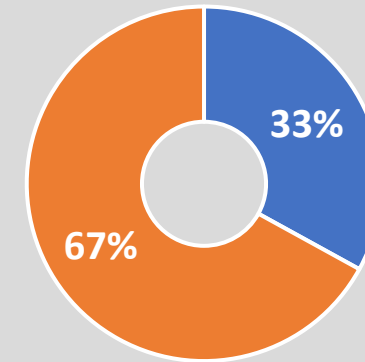
# DIABETES: BLOOD GLUCOSE

BLOOD GLUCOSE BREAKDOWN

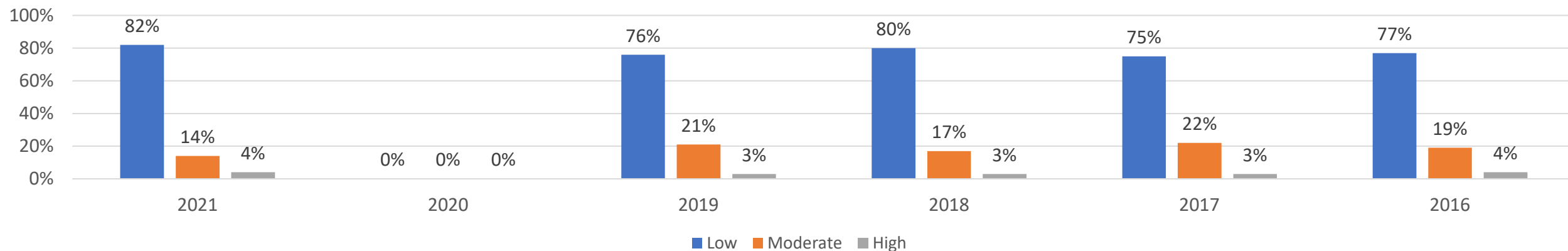


■ Low ■ Moderate ■ High

HIGH RISK AWARENESS

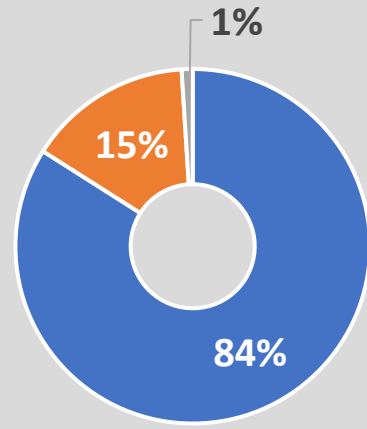


■ Aware ■ Not Aware



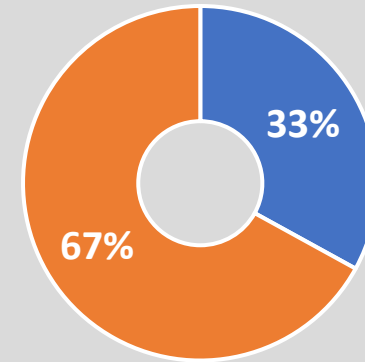
# DIABETES: HEMOGLOBIN A1C

A1C BREAKDOWN

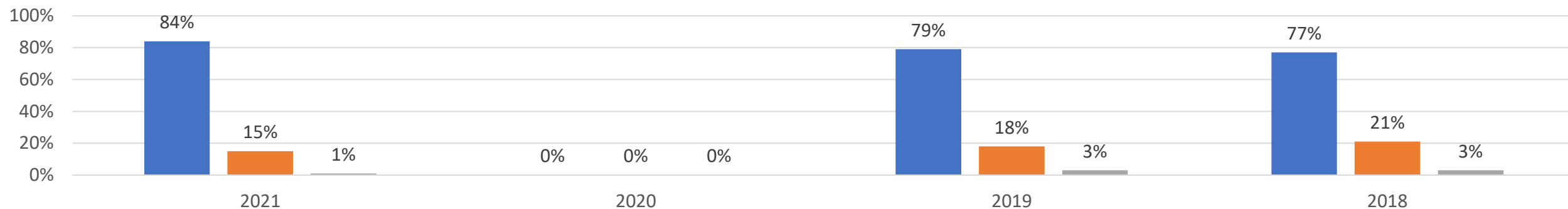


■ Low ■ Moderate ■ High

HIGH RISK AWARENESS

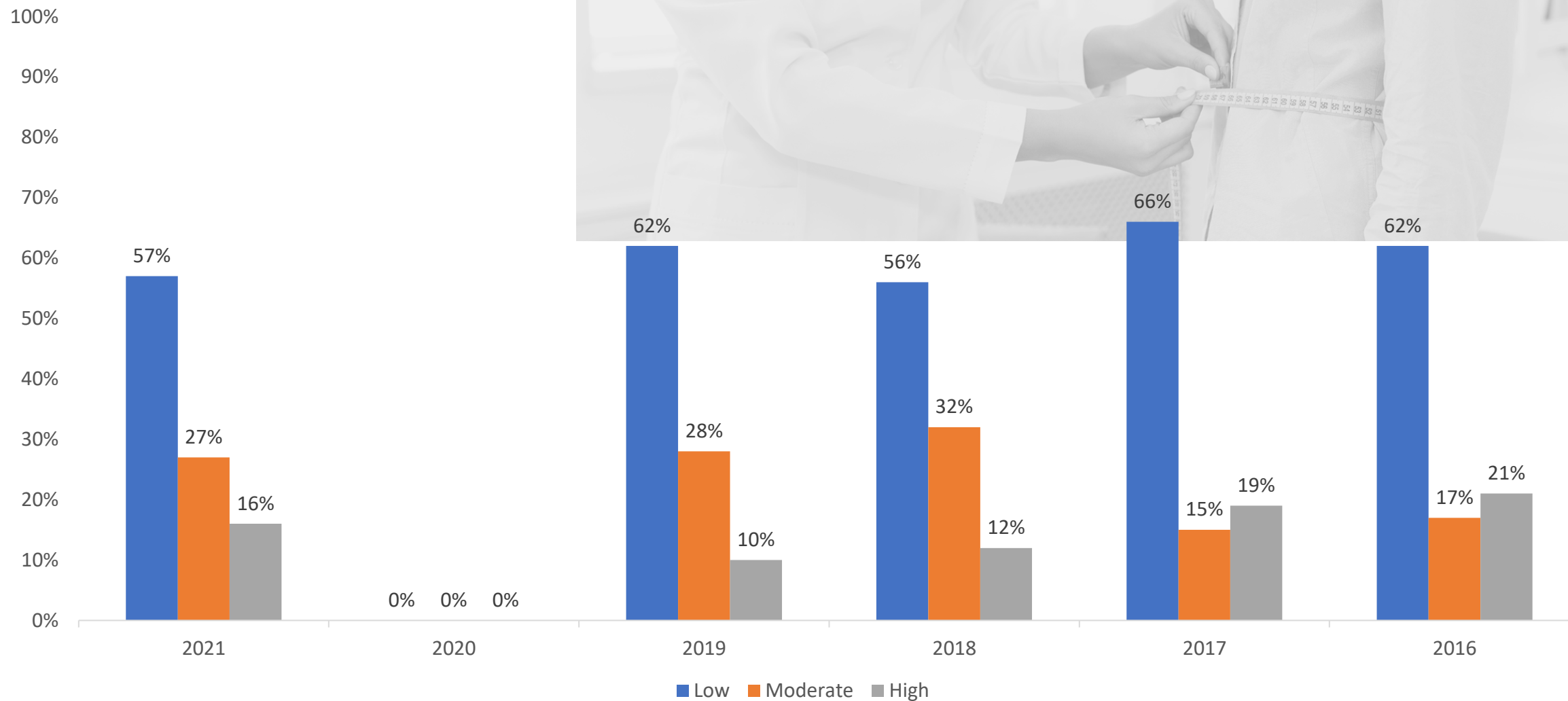


■ Aware ■ Not Aware

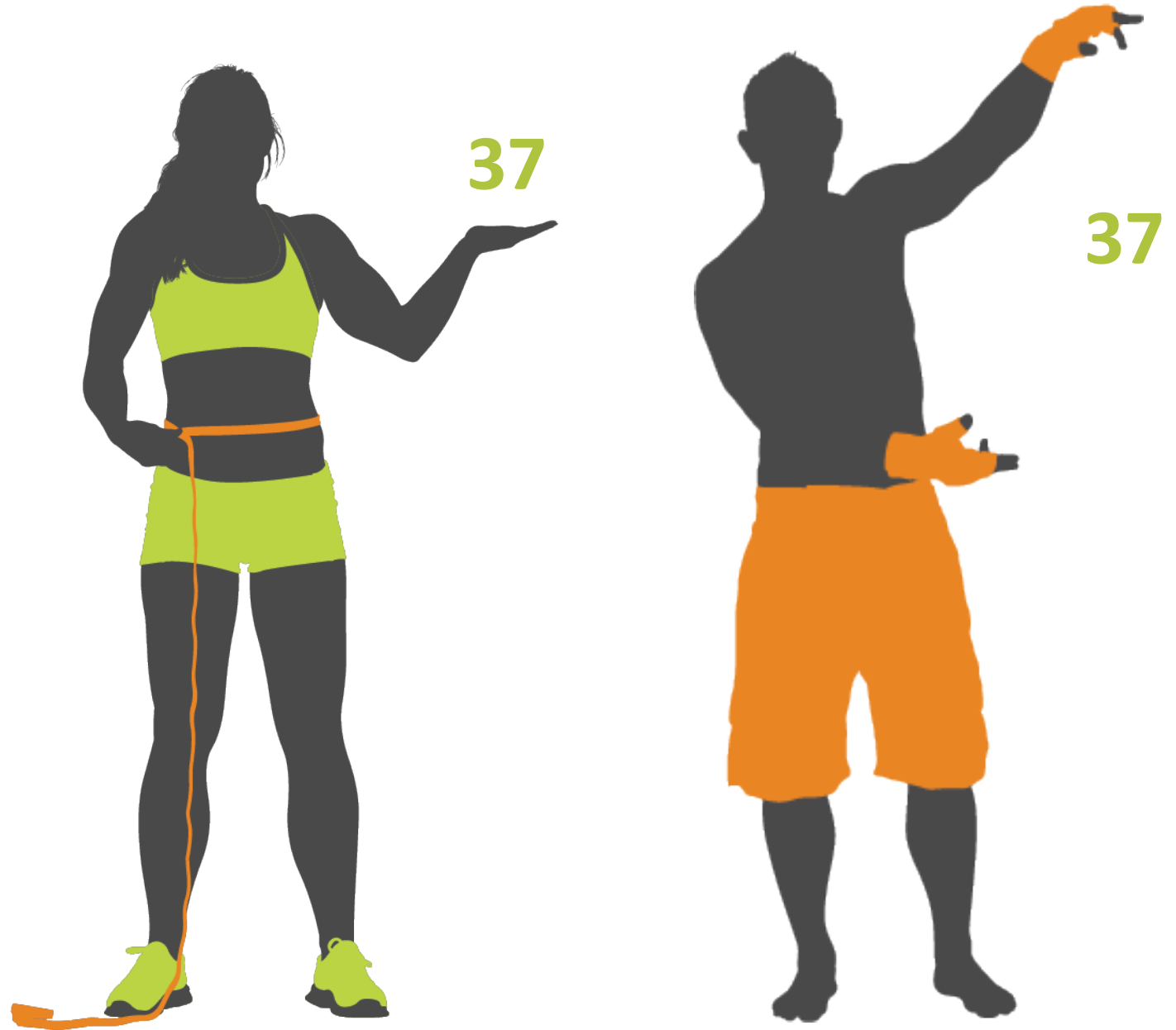


■ Low ■ Moderate ■ High

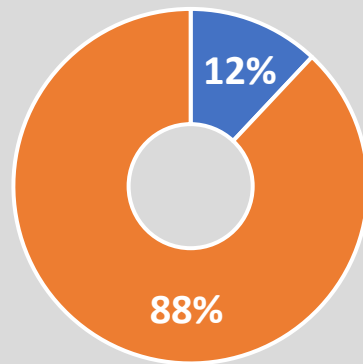
# BODY COMPOSITION: BODY MASS INDEX



# AVERAGE WAIST CIRCUMFERENCE FOR MEN AND WOMEN

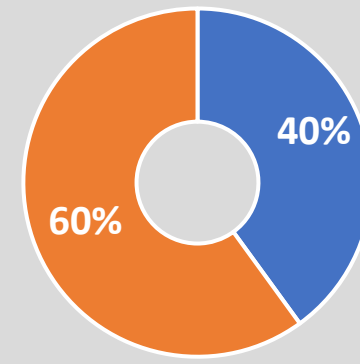


TESTED POSITIVE

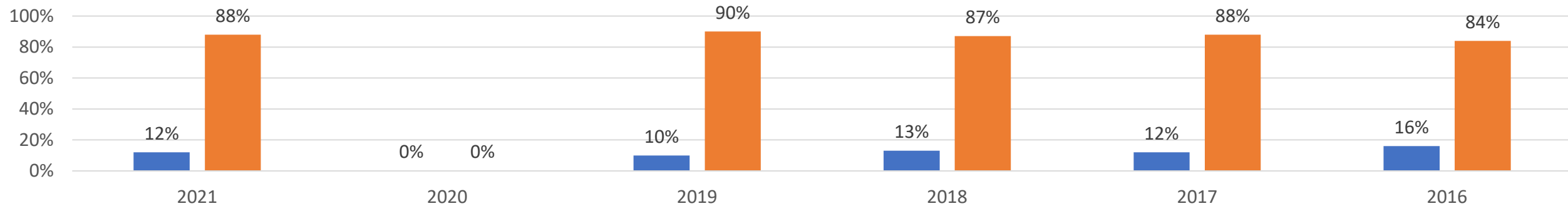


■ POS ■ NEG

INTERESTED IN QUITTING



■ Interested in Quitting ■ Not interested



■ POS ■ NEG

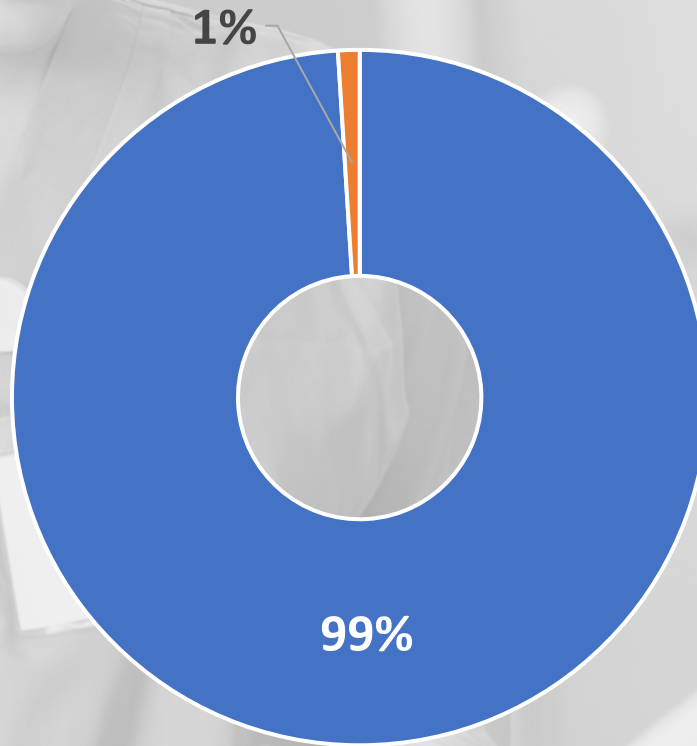




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## GAMMA-GLUTAMYLTRANSFERASE (GGT) TEST RESULTS

GGT BREAKDOWN



■ Low ■ High