



# QUANTUM HEALTH

Making the Complex Simple

Executive Summary - 2019



# Who We Are

We exist to create a guided experience through the healthcare and benefits journey

**1.3 Million+**  
consumers

**Inc.**



**170+** CLIENTS

**5000**

# Quantum Health in the Marketplace



## LEGACY CARRIERS BUY-UP

- Enhanced Member Services
- Traditional Clinical Services (CM/DM)

## INDEPENDENT NAVIGATION & ADVOCACY

- Navigation
- Advocacy
- Claims Assist

## DIGITAL SOLUTIONS

- Niche
- Condition or Solution Specific
- Alerts/Nudges
- Steerage

## HYBRID SOLUTIONS

- Navigation
- Advocacy
- Claims Assist
- Member Services
- Some Clinical Services

## COMPLETE CARE COORDINATION

- Navigation
- Advocacy
- Claims Assist
- Member Services
- All Clinical Services
- Provider Services

Late In Journey/Low Engagement

Early In Journey/High Engagement

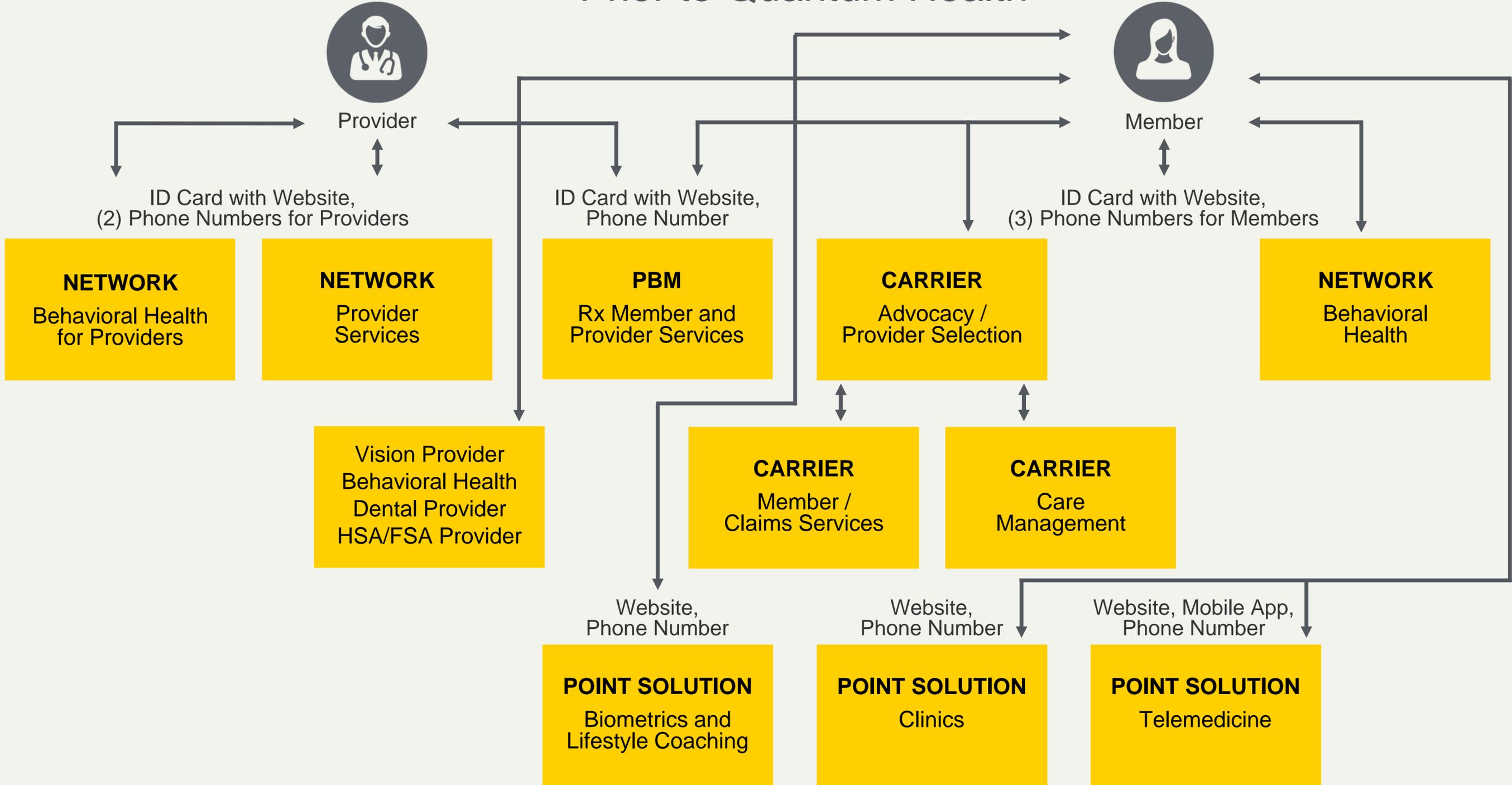
# Flexible Platform for All Employer Benefits

**ONE** PHONE NUMBER, WEBSITE AND MOBILE APP  
FOR MEMBERS AND PROVIDERS

- Medical
- Pharmacy
- Dental
- Vision
- Spending Accounts
- Point Solutions
- Life Insurance
- Leave of Absence
- Disability
- Retirement Programs
- Voluntary Benefits
- Other Benefits

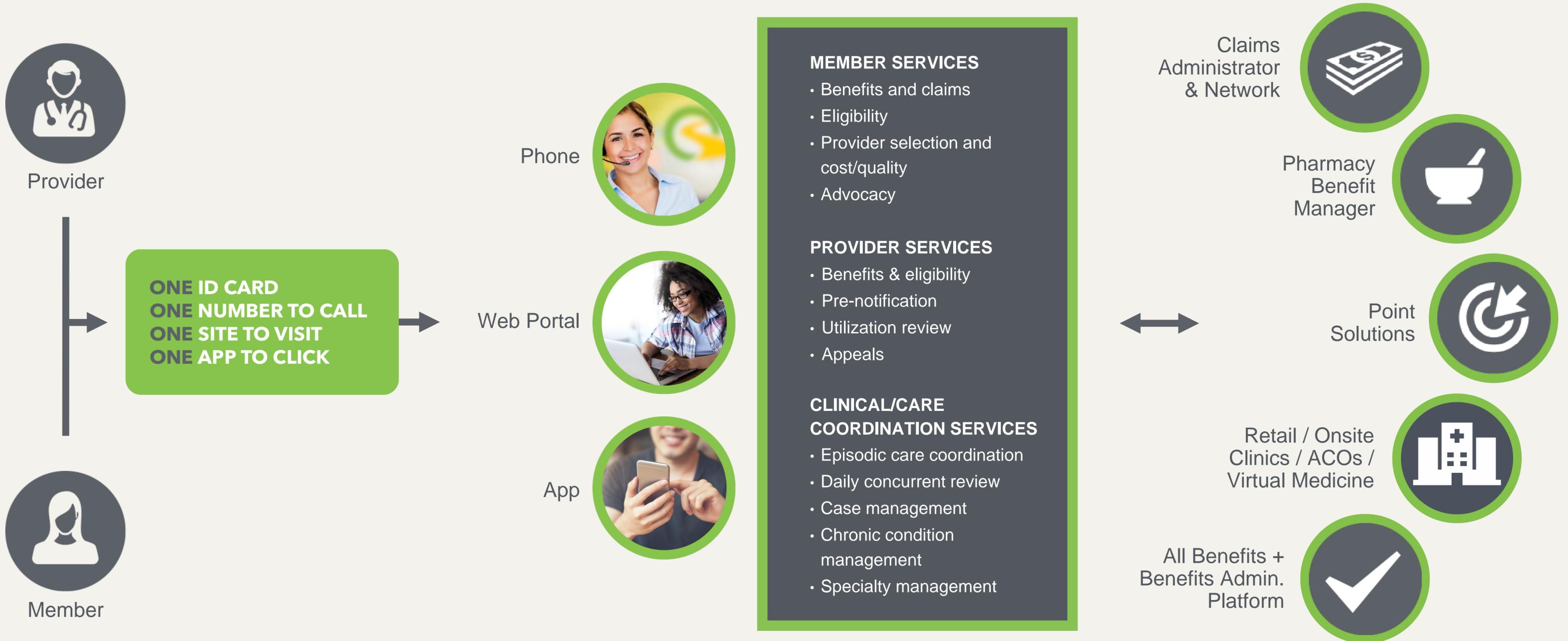
# Traditional Model Services and Member Experience

Prior to Quantum Health

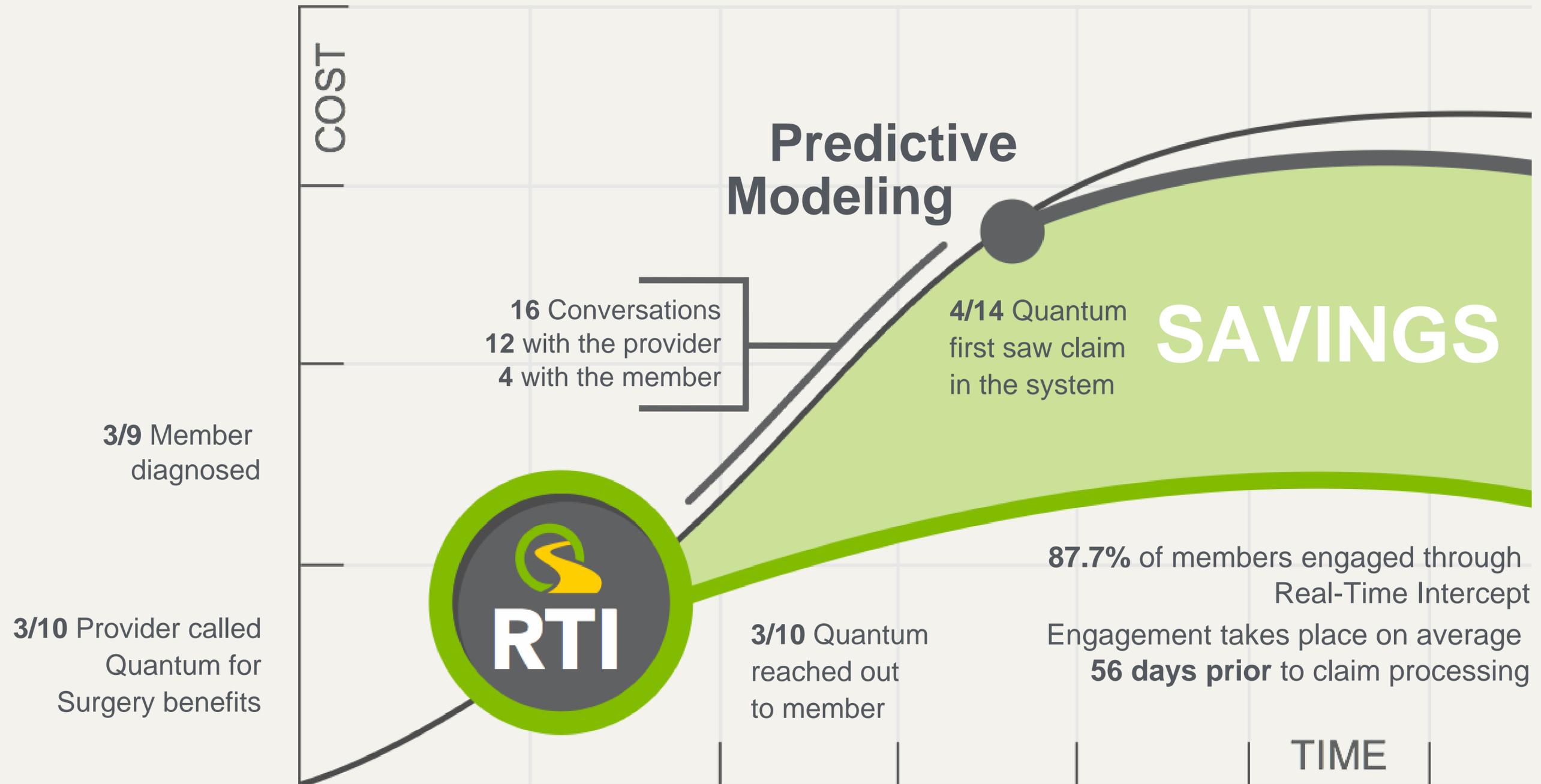


# Simplifying the Journey

Your one point of contact



# Real-Time Intercept™



# Our Model Delivers Proven Results

## Satisfaction



**74** MEMBER NPS

**77** CLIENT NPS

**74** PROVIDER NPS

## Engagement

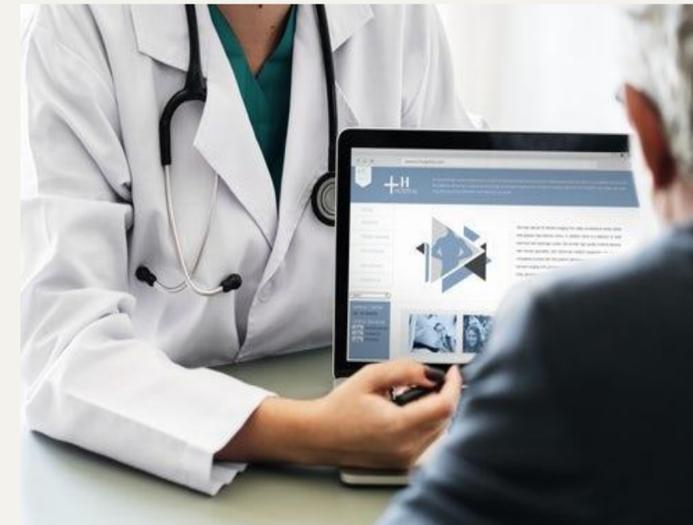


**84%** OF ALL HOUSEHOLDS

**95%** OF MEMBERS WITH CLAIMS > \$10K

**200%+** ENGAGEMENT IN POINT SOLUTIONS

## Outcomes



**+14%** PREVENTIVE SVCS

**-5%** INPATIENT ADMITS

**-32%** READMISSIONS

**-6%** COST OF CASES >\$25K

## Savings



**5%** COST REDUCTION IN YEAR 1

**11%** OVER THREE YEARS

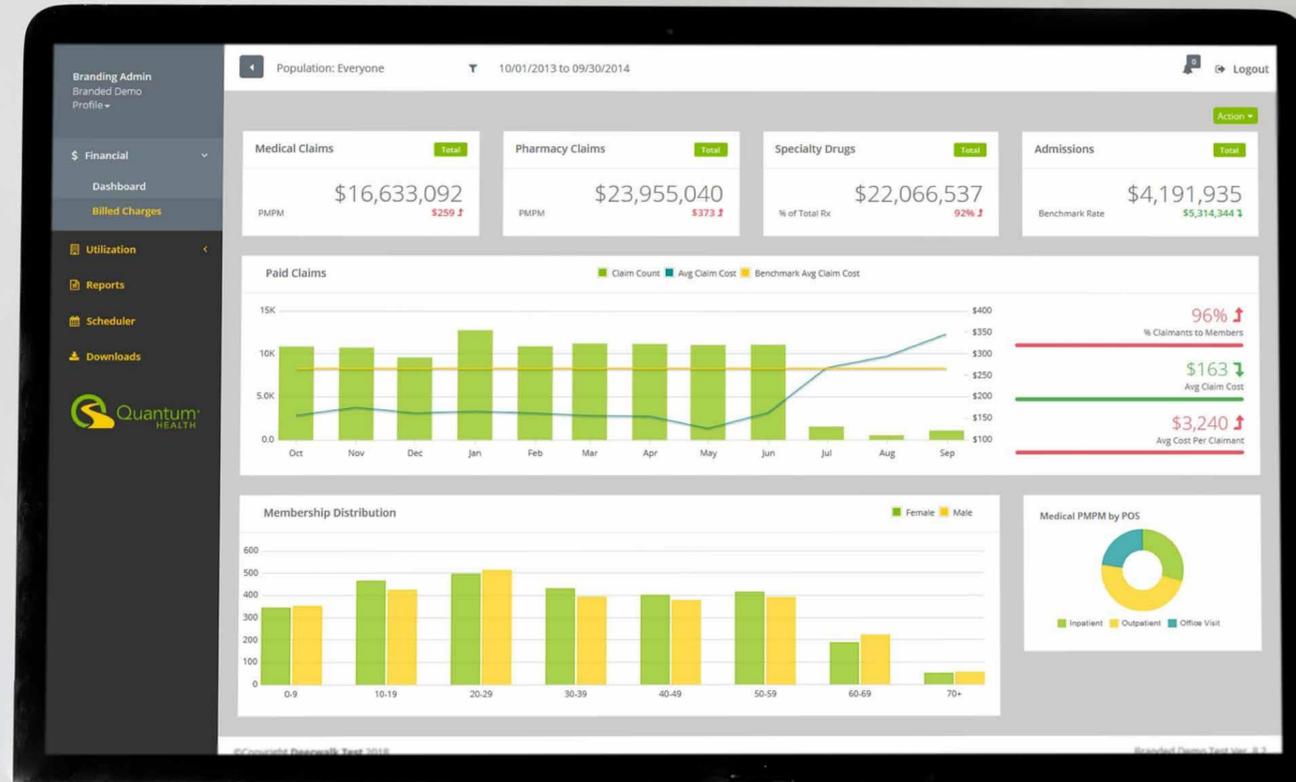
**\$618** AVG. YEAR ONE SAVINGS (PEPY)

\*The average savings is based on Quantum Health's actuarially validated savings study comparing actual versus projected cost (net of independent variables such as network discounts, plan design changes, plan migration, and demographic changes). This study is based on 133 groups over a 16-year period.

The \$618 PEPY savings is based on the average savings percentage applied to an industry reported 2016 PEPY claim cost.

# Data at Your Fingertips

## On Demand Reporting Tool



**Report Manager**

Search for a report by name

Select	Fav	Report Name	Description
<input type="checkbox"/>	<input type="checkbox"/>	Avoidable Admissions	Potentially avoidable admissions (also called ambulatory care sensitive conditions) are hospitalizations for diagnoses for which timely and effective outpatient care...
<input type="checkbox"/>	<input type="checkbox"/>	Avoidable Care Continuum	A report on the potential financial impact of transitioning avoidable emergency room utilization to urgent care and office settings. Includes average cost of treatme...
<input type="checkbox"/>	<input type="checkbox"/>	Avoidable ER - Day of the Week	Potentially avoidable emergency room visits occur for diagnosis that could have been appropriately managed in other, more cost-effective settings, such as an urg...
<input type="checkbox"/>	<input type="checkbox"/>	Avoidable ER - Diagnosis	Potentially avoidable emergency room visits occur for diagnosis that could have been appropriately managed in other, more cost-effective settings, such as an urg...
<input type="checkbox"/>	<input type="checkbox"/>	Breast Cancer Treatment Path	Narrative walkthrough of care quality indicators for breast cancer.
<input type="checkbox"/>	<input type="checkbox"/>	Care Alert Score Summary	Summary of population compliance with national standards for care quality.
<input type="checkbox"/>	<input type="checkbox"/>	Chronic Conditions Prevalence	Total and per 1000 prevalence of each chronic condition in the reporting and comparison periods.
<input type="checkbox"/>	<input type="checkbox"/>	Chronic Conditions Utilization	Office, ER, Admission, Re-Admission and PMPV plan paid amounts for members with each chronic condition.
<input type="checkbox"/>	<input type="checkbox"/>	Claim Lag - Medical	Generates an incurred-to-paid tag table of medical plan paid dollars. The table will re-size dynamically. Change the length of your report period to adjust the size o...
<input type="checkbox"/>	<input type="checkbox"/>	Claim Lag - Pharmacy	Generates an incurred-to-paid tag table of pharmacy plan paid dollars. The table will re-size dynamically. Change the length of your report period to adjust the size...
<input type="checkbox"/>	<input type="checkbox"/>	Coverage by Relationship Class	Enrolled membership on the last day of the report period by relationship to employee. Includes plan paid amounts. Uses standardized relationship classes.
<input type="checkbox"/>	<input type="checkbox"/>	Coverage by Relationship Code	Enrolled membership on the last day of the report period by relationship to employee. Includes plan paid amounts.
<input type="checkbox"/>	<input type="checkbox"/>	Demographic Risk Analysis	Stratifies prospective risk scores (MARA) by age, gender and member relationship to employee.
<input type="checkbox"/>	<input type="checkbox"/>	Division Risk Analysis	Uses the output of the MARA risk model to report on prospective and concurrent risk along with associated costs.
<input type="checkbox"/>	<input type="checkbox"/>	Division Summary Report	Breakdown summary of medical and rx costs, enrollment and risk.
<input type="checkbox"/>	<input type="checkbox"/>	Drug Switch - Detail	A detailed analysis of brand name drugs that could be replaced with less costly generic alternatives. Includes financial details and potential savings.
<input type="checkbox"/>	<input type="checkbox"/>	Drug Switch - Summary	A summary of potential savings that could be realized by replacing brand name drugs with less costly generic alternatives.
<input type="checkbox"/>	<input type="checkbox"/>	ER Analysis	Emergency room visits by severity and diagnosis. Also shows "frequent flyer" rates, members with a large number of emergency room visits in the period.
<input type="checkbox"/>	<input type="checkbox"/>	ER Utilization Dashboard	A visual summary of Emergency Room Visits.
<input type="checkbox"/>	<input type="checkbox"/>	Frequency of Selected Procedures	Tracks the utilization of a fixed list of procedures with a high potential for inappropriate utilization.
<input type="checkbox"/>	<input type="checkbox"/>	Group Risk Analysis	Uses the output of the MARA risk model to report on prospective and concurrent risk along with associated costs.
<input type="checkbox"/>	<input type="checkbox"/>	Group Summary Report	Breakdown summary of medical and rx costs, enrollment and risk.
<input type="checkbox"/>	<input type="checkbox"/>	Health Plan Snapshot	High-level summary of membership and plan costs by benefit type.



**To Learn More Visit:**

**[www.quantum-health.com](http://www.quantum-health.com)**

**Overview Video:**

**[https://vimeo.com/user10628430/  
review/265003262/3d854194c7](https://vimeo.com/user10628430/review/265003262/3d854194c7)**

# APPENDIX: CASE STUDIES

# CASE STUDY

## HOW CAN COMPANIES CONTROL HEALTHCARE COSTS WITHOUT COMPROMISING SERVICE?

### CHALLENGE

### SOLUTION

- Multiple points of contact in traditional models creates complexity
  - Traditional carrier service silos impede responsiveness and cause frustration
  - Lack of guidance when members need help
- Simplify the experience with a single point of contact for members and providers
  - Eliminate silos with dedicated pod teams working side by side from one system
  - Increase engagement and provide guidance with Real-Time Intercept

### COMPARISON OF B2C NET PROMOTER SCORE

#### QUANTUM HEALTH

73 NPS

AMAZON	62
WESTIN	59
GOOGLE	57
NETFLIX	54
KAISER	40
HUMANA	21
HEALTH INS AVG.	18

### COMPARISON OF B2B NET PROMOTER SCORE

#### QUANTUM HEALTH

78 NPS

VONAGE	55
CISCO	38
CONSTANT CONTACT	20
CITIGROUP	18

# CASE STUDY

## Improve Employee Experience and Financial Impact

CLIENT	ACTIONS	OUTCOMES
 <p>Large pharmaceutical employer partnering with Quantum Health for four years</p>	<ul style="list-style-type: none"><li>• Assumed responsibilities of internal call center</li><li>• Ensured complex benefit plans were implemented accurately across multiple Payers</li></ul>	<p><b>-7.2%</b> Healthcare trend for Active employees*</p>
 <p>65,000 enrolled members, geographically dispersed</p>	<ul style="list-style-type: none"><li>• Worked closely to ensure sensitive members were hand-held through the transition</li><li>• Optimized utilization of seven point solutions<ul style="list-style-type: none"><li>• Developed proactive and transparent relationship with client</li></ul></li></ul>	<p><b>2,090</b> Referrals to Point Solutions</p>
 <p>Client Goal: Improve employee experience to drive engagement and positive financial results</p>	<ul style="list-style-type: none"><li>• Continue to drive enrollment to preferred plan through education and communication</li><li>• Routinely share input and strategy guidance</li><li>• Elected to expand program to include family members through CarePartner©</li></ul>	<p><b>89%</b> Engagement of members with claims over \$10,000 identified prior to \$1,000 claim month</p> <p><b>93%</b> High Risk member engagement</p> <p><b>+74</b> Member NPS Score</p>