



MARSH

Unlocking the Power of Data: Measurement Best Practices to Supercharge Your Program Impact

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We are Marsh

Marsh is a global professional services firm helping clients navigate complexity and seize opportunities with market-leading, specialized capabilities across risk, reinsurance and capital, people and investments, and management consulting.

Market-leading expertise across:
Risk | Strategy | People

130+ countries with clients	90,000+ global colleagues
\$26.5B+ annual revenue¹	123rd largest company in S&P 500 on market cap²

1 As of September 30, 2025.
2 As of 1/9/2026.



Turn complex data into clear opportunities.

An industry-leading analytics platform that helps self-insured employers, advisors, and health plans lower costs and optimize care.

BY THE NUMBERS

2,500+

Employers supported

21M

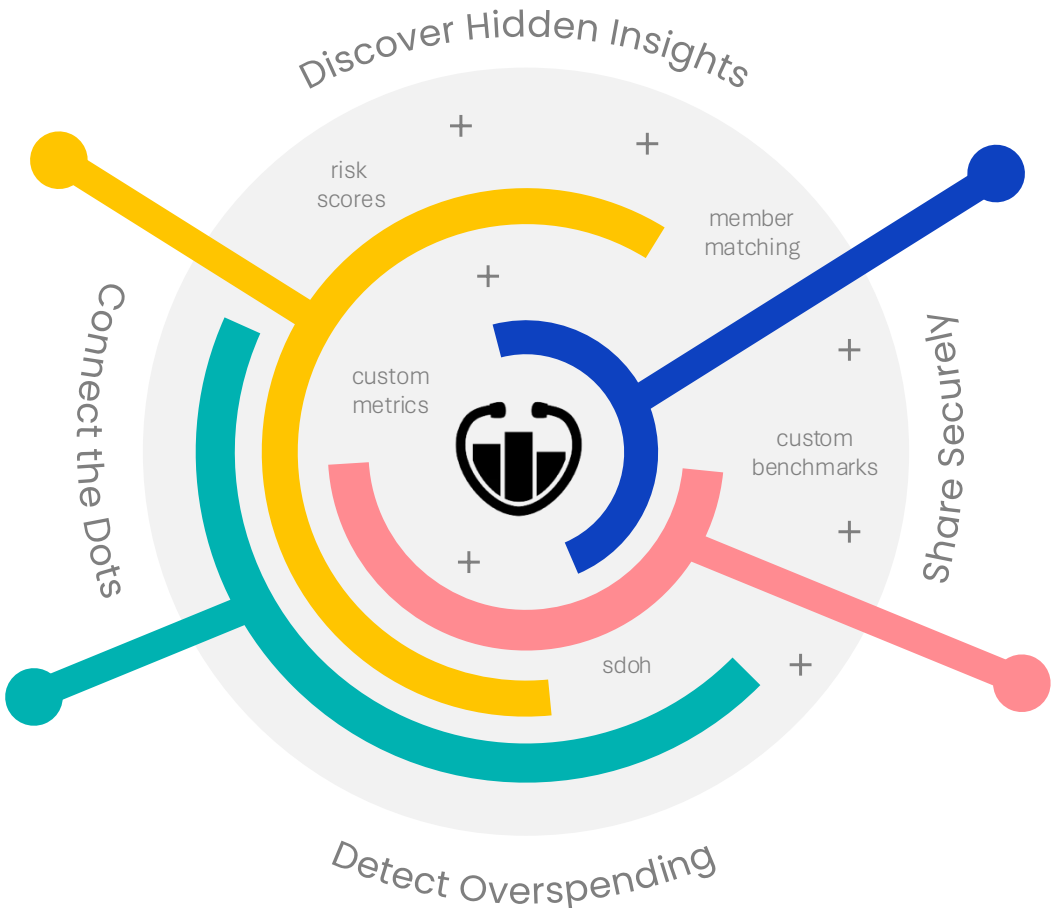
of US Lives Supported

One Hub Powers Your Thriving Data Ecosystem

Benefits & Admin



Care Partners



Advisory Network



Software Integrations



Unleash Your Data's Full Potential!

Barriers to optimizing the value of data

Lack of integration across diverse data sets



Too many reports from too many sources



Data is informational rather than actionable



No definitive, defensible answer to questions



No analytic story for a diverse audience



Internal budgetary limitations



MARKET DYNAMICS

- 01 Evolving data warehouse landscape**
- 02 Multiple carriers and carve-out partners**
- 03 Growing interest in diverse data and point solution evaluation**
- 04 Multiple pathways to optimize data**

Bottom line — a measurement strategy is essential!

Value is defined by YOU regardless of the data source

How your data tells your story and delivers value

Optimizing value begins with your questions and needs

The question drives the data, the objective measures, the source, frequency, design and uncovers any data gaps

Intuitive approach to go below the information at the surface to uncover actionable and realistic opportunities

Measurement strategy is the foundation of value



Question or analytic need



Data source and production



Analysis and insights

Some of the top questions that we hear from employers



Is my **high performance plan** working the way I expected?

Are my **programs and point solution** working?

What can we learn about **HCCs** that we can act on?

Is there opportunity in specific populations to **improve health outcomes**?

How can data inform our **communications strategy**?

Spotlight – Value Based Plans

Objective: Offer Plans that deliver on higher quality and efficiency

When does a value-based plan make sense?

- Aging populations with higher risk
- Increasing prevalence of chronic condition
- Decreasing utilization of primary / preventive care
- Low value care services trend higher YoY
- High-cost therapies (e.g., specialty Rx, CAR-T, etc.)
- Direct-contracting and COE arrangements
- Prove plan value in addition to access

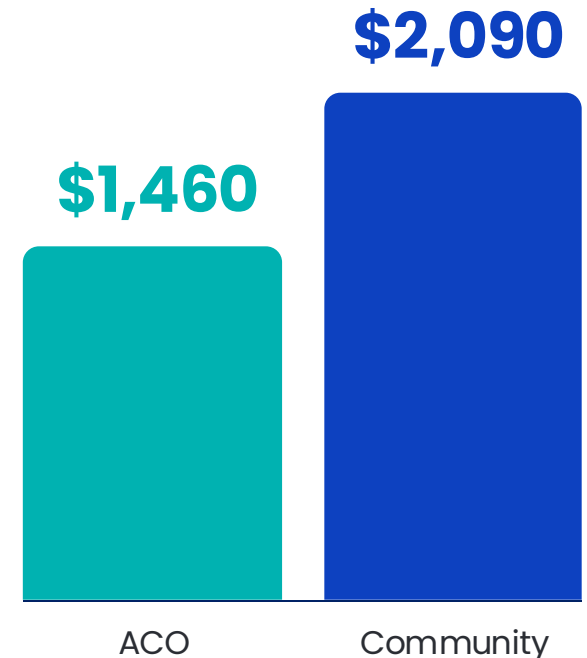
How do you select the right value-based Plan?

- Population characteristics
- Network adequacy
- Support Services
- Administration burden
- Plan Implications

How do you monitor and evaluate the impact?

- Performance Guarantees
- A standard **member attribution** methodology
- Use a diverse set of compliance metrics
- Avoidable ED visits, low-value services, and preventable inpatient admissions.
- Emerging and predicted risk populations with proactive interventions

Risk Adjusted PMPY – ACO Attributed Members vs Community



Spotlight: High-Cost Claimants

Objective: Predict, Mitigate and Manage

How can we better predict or anticipate high-cost claimants?

- Identify **newly diagnosed** conditions or newly prescribed drugs
- Care patterns for non-compliant members
- Untreated (or under treated) behavioral health conditions
- Deploy **predictive models**, actuarial risk scores, or similar algorithms
- Follow cost trends for historic/ repeat HCCs

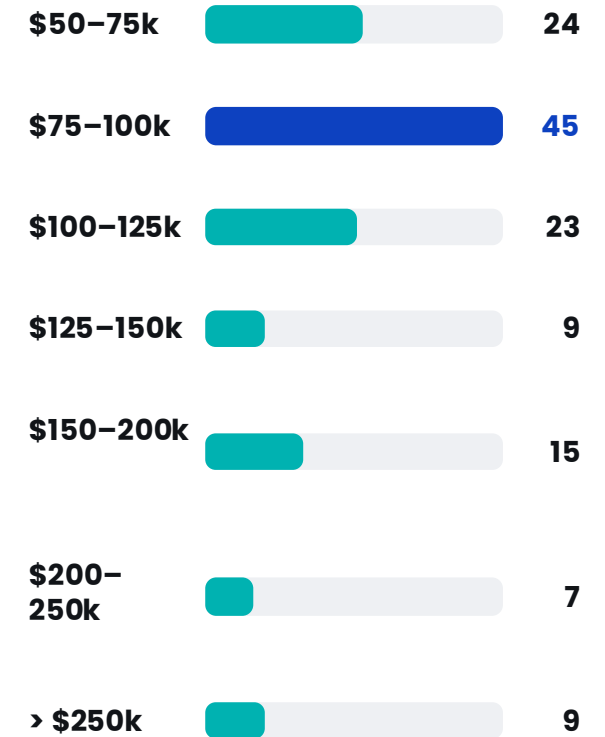
How can we mitigate the prevalence of high-cost claimants?

- Non-Claimant trends
- Preventive care compliance
- Acute events to mitigate chronicity
- Persistent or Chronic conditions – site of care, adherence to mitigate avoidable complications
- Injury prevention – safety

How can we manage them to achieve optimal outcomes and reduce avoidable costs?

- Identify HCCs where costs are “Controllable”
- Stabilize current HCCs in the same cost bracket
- Clinical Oversight and Case Management Models – including PGs

Projected Cost Bands for Predicted HCCs



Spotlight: Optimizing point solution reporting

Are we optimizing our investments?

ASK YOURSELF FIRST

- 01 Does this solution solve for a known problem?**
- 02 Does this solution offer additional value than what we have today?**
- 03 Is the effort worth the expected value or return?**
- 04 What are our expectations?**

EVALUATION APPROACHES

- 01 Participant vs. non-participant**
Meaningful participation; continuously enrolled; engagement bias risks
- 02 Matched control**
Compare participants to similar non-participants to isolate program impact.
- 03 Return on investment (ROI)**
Review the vendor's ROI, replicate it, or use an independent third party.
- 04 Value of investment (VOI)**
A broader view of total value where cost is just one piece: satisfaction, surgery avoidance, productivity, biometric or risk improvements, risk score changes, and better compliance with well care and evidence-based medicine.

Point Solution Cohort Comparison - Diabetes Rx PMPY

Utilizers

\$341

Non-Utilizers

\$367

Best practices for optimizing carrier reporting

How to get the most value from your chosen partners



Set expectations

- Inventory standard reports – their scope, purpose and frequency
- Clearly define your questions, analytic needs and reporting cadence – consider all stakeholders



Make the most of annual meetings

- Build the agenda around your priorities: about 50% data, 50% optimizing current programs or making changes.
- Ask them to start with the answers.
- Ask them to align recommended actions with your specific data.



Review performance guarantees

- Have them report on performance guarantees and service level agreements at least twice a year.
- If performance is less favorable, ask for explanations and actions.



Develop a Plan

- Agree to actionable next steps
- Agree to measures to monitor the impact and frequency
- Identify gaps and a plan

Remember — your partners want to keep your business. Help them be their best for you by telling them what you need and want.

Key Take Aways – Questions and Answers – Contacts

Best practices for measuring program impact



Key Take Aways

- It all begins with your questions and analytic needs
- Drive carrier and vendor engagements around your questions and needs and challenge them to come prepared
- Ask them to distinguish information from actionable opportunities



Questions and Answers



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