

Helping Lower Health Care Costs Through Comprehensive Rare Disease Management

A Clinical and Economic Outcomes Study with AccordantCare® Rare



Accordant®
♥ CVS specialty nurse care management

Accordant Health Services® (Accordant®) provides proactive, whole-person care management services to members with rare and complex conditions.

Through coordinated outreach efforts centered on an individualized action plan facilitated by an Accordant nurse, Accordant helps improve member knowledge of their condition, enhances self-management skills and coordinates care with physicians. Program engagement can help lead to improved health outcomes and reductions in avoidable inpatient hospital and emergency room (ER) admissions.

Purpose and approach

The objective of this case study is to quantify the persistency of clinical and financial impacts of the Accordant program on a mature health plan client's rare disease member population. To do this, we looked at the population of a long-term, regional health plan client. We then analyzed the difference in medical cost and utilization over time.

The analysis of financial impacts was based on a total program-eligible population in two similarly identified cohorts in two twelve-month consecutive periods: the baseline period ("baseline period") and the period under measurement ("program year"), or program year five and program year six, respectively. Performance exhibited in program year six is expected to be representative of a mature, stable member population. All incurred medical and pharmacy claims were part of the analysis, including three months of claims payment run-out to capture the most robust practical measure of member claims experience. All figures have been rounded and, in some cases, ranges presented to protect proprietary data and client confidentiality.

To control for health care service cost changes from period to period, baseline period costs are adjusted forward via application of a client-specific cost trend to arrive at expected program year costs for an unmanaged population. To control for the impact of high-cost outliers, these members were identified and allowed amount costs were normalized by capitation. Outlier capitation was applied equally to each analysis period to further ensure population and cost comparability.

Specialty drug adjustments were applied to account for year-over-year fluctuation of specialty drug prices for Accordant-managed conditions. Costs for these drugs typically increase faster than other categories of medical and pharmacy spend. Thus, an adjustment was applied to this analysis to control for the difference between the trend observed in overall medical and pharmacy costs and the observed trend specific to specialty drug costs.

Financial outcomes and return on investment


The Accordant program demonstrated a reduction in health care-related costs for the client’s eligible population during program year six.*

An average gross savings of \$1,200 per eligible member was observed during program year six.

After incorporating program fees paid, the client saw an overall net savings that fell between 2.4 and 2.6 million dollars within the approximately 2,500–5,000 member population. The return on investment (ROI) ranged between 2.7 and 3.7. Savings were primarily driven by outpatient and inpatient medical spending that was lower than projected.



PROGRAM YEAR 6 Financial Impact Summary**

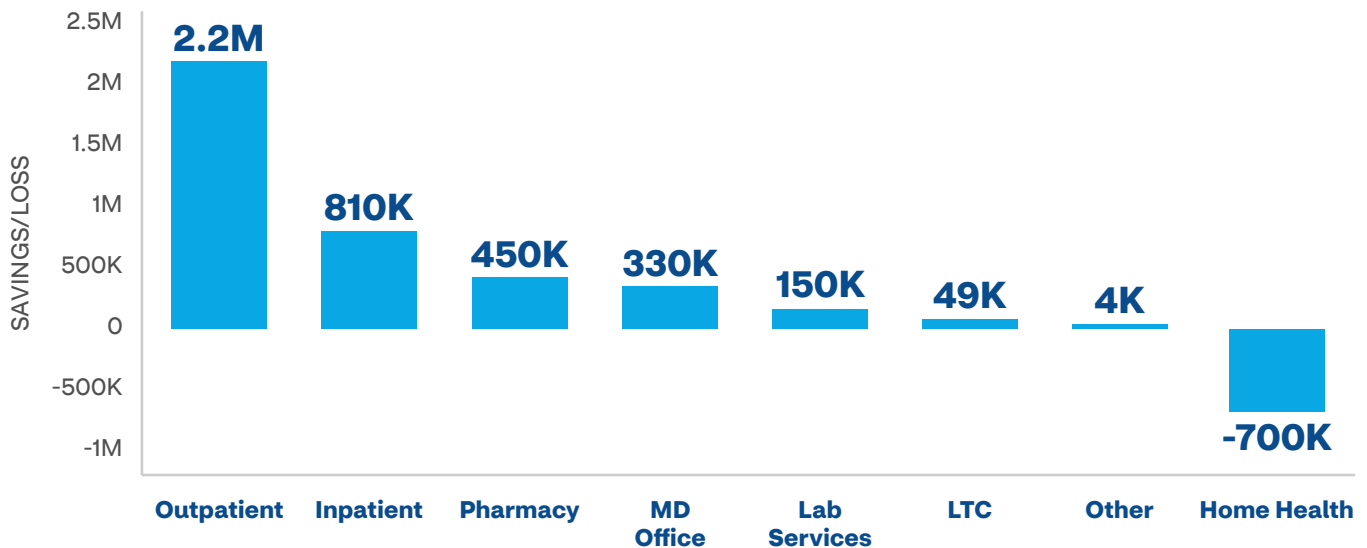
<p>Expected Measurement Period Costs</p> <p>\$84.6M</p>	<p>Actual Measurement Period Costs</p> <p>\$81.3M</p>	<p>Gross Savings</p> <p>\$3.3M</p>
<p> Net Savings</p> <p>\$2.4M–\$2.6M</p>		<p>Net ROI</p> <p>2.7–3.7</p>

Savings by condition

Disease	BASELINE		PROGRAM YEAR 6				Gross Savings	Net Savings	Net ROI		
	Paid	PEMPM†	Paid	PEMPM†	Expected PEMPMT	Expected Paid					
Crohn's Ulcerative Colitis	\$27,300,000	\$2,814	\$27,400,000	\$2,686	\$2,775	\$28,300,000	\$827,000	\$2.4M- \$2.6M	2.7- 3.7		
Rheumatoid Arthritis Scleroderma Lupus Seizures Myasthenia gravis Myositis	\$25,710,000	\$1,850	\$26,260,000	\$1,734	\$1,848	\$27,980,000	\$1,776,000				
Multiple Sclerosis CIDP ALS Parkinson's Cystic Fibrosis Hemophilia Sickle Cell Anemia Gaucher	\$27,930,000	\$5,270	\$27,554,000	\$4,920	\$5,041	\$28,230,000	\$677,000				
Total	\$81,100,000	\$2,800	\$81,300,000	\$2,600	\$2,700	\$84,600,000	\$3,300,000			\$2,400,000- \$2,600,000	2.7- 3.7

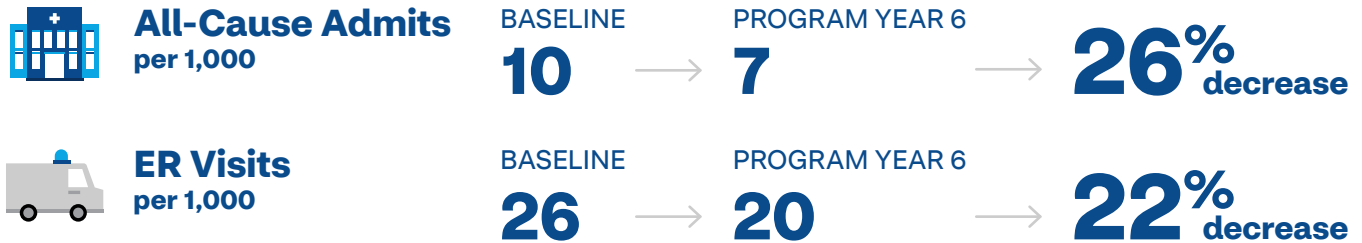
Savings by place of service††

Lower-than-expected outpatient and inpatient facility costs represented most overall savings. Additional costs in the home health setting were primarily driven by isolated cases from members with amyotrophic lateral sclerosis (ALS) and hemophilia.



Inpatient utilization measures

Proactive, Accordant nurse-delivered care management was also shown to improve clinical metric performance within condition groups. These interventions included rare condition education and the creation of individualized action plans to help members recognize and address signs of disease exacerbation before an ER visit or unplanned hospitalization results. This translates into savings through reduced utilization of high-cost medical services. All-cause inpatient admissions and ER visits decreased by twenty-six percent and twenty-two percent respectively from baseline to program year.

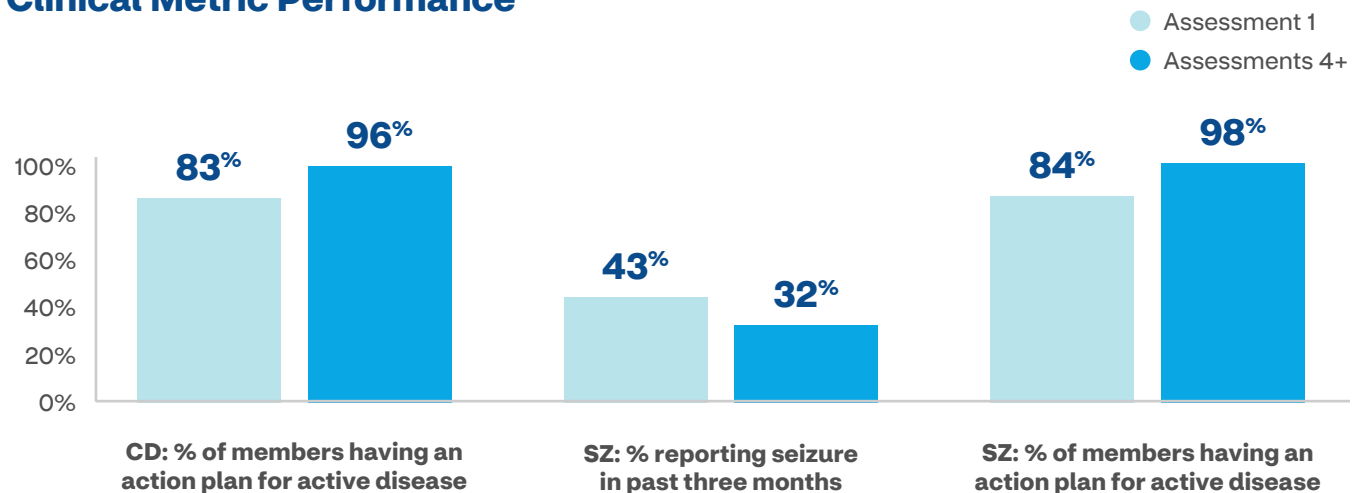


Clinical outcomes

For those who engage with the program, Accordant nurses administer frequent assessments to evaluate the progress of members' understanding of their condition and symptoms. Clinical metrics typically serve as leading indicators of behavior change, which then translates into medical savings.

At baseline, more than fifteen percent of engaged members with seizures or Crohn's disease did not have an action plan for their active disease management. By the end of the program year, ninety-eight percent and ninety-six percent, respectively, reported having an action plan for active disease management. Additionally, a twenty-six percent relative reduction in reported seizures was observed during the program year in members with seizures.

Clinical Metric Performance





Conclusion

After analyzing the clinical and financial data for program years five and six, we observed reduced utilization in both inpatient and outpatient settings, improved clinical metric performance and positive ROI.

This demonstrates the continued positive financial and clinical impact of the Accordant program on the client's rare and chronic condition population many years following program launch.

To learn more about how Accordant can help you lower costs and improve member outcomes, contact your account manager for an opportunity analysis.

*Year six is the focus of this paper and is expected to be representative of a mature, stable member population.

**All costs include both medical and pharmacy claims.

†Please note that, while paid amounts are additive, PEMPM (Per Eligible Member Per Month) values are a function of cohort size. Cohort sizes have been omitted to preserve client anonymity.

††All measure rates per 1,000.

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