How did one client improve the health of its employees while saving over $2 million on medical claims costs?

With an Accountable Care Organization (ACO) as part of its employee benefits plan, one client was able to achieve the best of both worlds: the efficient care and savings of an ACO, plus the collaborative care of case management from a top healthcare administrator. This led to improved member health and subsequent savings on the cost of employee benefits.

The challenge

A Meritain Health client had more than 3,200 member lives in need of benefits coverage. In 2013, leaders realized they needed a change in the employee health plan strategy. Spending on medical claims had reached over $11 million, and network access fees were close to an additional $400,000 each year. Also, an increase in high cost claimants suggested that the health of the employee population had been declining. The company needed a way to get costs under control without sacrificing the quality of healthcare benefits—and also needed a stronger focus on wellness.

The opportunity

The client was interested in moving to a network structure that would allow for increased cost savings. It also needed a way to support and guide employees in good health.

The plan—part I

To address its challenges, the client worked with its consultant and Meritain Health to move the provider network to Aetna Choice® Point of Service (POS) II—the first step in the company’s benefits strategy. This network transition allowed for cost savings through deep network discounts and lower access fees.

During its first year with Aetna Choice POS II, the client was able to save close to $1 million on the cost of annual medical claims, plus $100,000 in network access fees.

The plan—part II

After this first success, the client was interested in a more aggressive benefits plan strategy for the 2015–2016 plan year. To achieve this, leaders again worked with their benefits consultant and Meritain Health, and decided to implement an Aetna Whole Health - Banner Health ACO plan. They were interested in the unique savings opportunities an ACO offered, as well as the focus on efficient and collaborative healthcare. As with all Meritain Health benefit plans, the client also had access to the high-touch service and support provided by Meritain Health Case Management. It’s the combination of the ACO plus case management that made all the difference.

About Banner Health Network

An ACO is a group of doctors, hospitals and other healthcare providers who work together to coordinate high-quality member care. Their goal is to ensure members get the right care at the right time and avoid unnecessary or duplicate healthcare services.

The ACO strategy allows for cost savings through:

- Patient-centered service and care management models.
- A focus on wellness and managed chronic conditions.
- A culture change from reactive to proactive care.
Banner Health Network Success:

- 11.5% overall reduction in medical costs vs. expected
- $9.9 million in shared savings from 2013–2015
- 4% increase in generic dispensing
- 24% decrease in surgical admissions

Why Banner Health Network?

- 1,000+ primary care physicians and 7,000+ specialists
- Over 125 urgent care centers, 16 hospitals, 11 health centers and 14 emergency centers

About Meritain Health Case Management

At the heart of the Meritain Health Case Management program is a spotlight on health. Case Management nurses reach out to employees with serious health conditions to offer support, guidance and health education. Specially trained nurses help each employee understand their condition and how to live their healthiest life. Then, case management nurses collaborate with doctors and healthcare providers. This helps ensure prescribed treatments are appropriate, and Meritain Health resources are matched to employees’ unique health needs.

Overall case management ROI: 6:1

For every dollar spent on case management, clients have saved over $6 on program costs. ROI for Case Management is calculated as savings gained from interventions over the cost of the program.

Results: the value of Meritain Health + Banner Health ACO

The client’s plan design included the advantages of collaborative, efficient healthcare plus the top-rated products, cost savings and service of Meritain Health. This patient-centered model focuses on wellness and the management of chronic conditions.

For the 2015–2016 plan year, enrollment in the ACO was promising—48 percent of employees and eligible dependents enrolled in the plan.

Our unique partnership helped the following members improve their health—and their life:

- Kim, a woman in her mid-40s is currently in remission from cancer thanks to the collaborative care of Banner Health providers and Meritain Health Case Management
- Julie, a cancer survivor who gained strength through Meritain Health Oncology Case Management

By implementing the Banner Health ACO plan with the proactive, high-touch service and support provided by Meritain Health Case Management, the client was able to improve the care received by its employees while reducing medical claims spending by more than $1.5 million dollars. Overall, savings realized through their entire plan transition from 2013–2015 were over $2 million.

Medical claims costs

![Medical claims costs chart]

“We proceeded with the ACO plan because we liked the concept of an Accountable Care Organization. The level of care an ACO plan provides would assist both the employees and the district.”

~ Insurance Coordinator for this client
Member Success Story #1: A Second Chance

“Is it normal to feel this tired?”

Chasing after active kids when you have a full-time job can be exhausting. But Kim was only in her mid-40s and felt rundown all the time. She guessed her fatigue was linked to the fact that she was having trouble sleeping. Fearing something was wrong when she began to run a low-grade fever, Kim was still startled when her doctor recommended an oncology appointment.

An unexpected diagnosis

Kim couldn’t believe what she was hearing, but it was true. After a series of tests, her oncologist called her for one more office visit. His news was devastating: she had a rare form of cancer that would require a strong level of chemotherapy. Due to her aggressive treatment, he recommended a stem cell transplant to help replace Kim’s blood cells. All of this was a lot for Kim and her family to process. She contacted Meritain Health for help.

Coordinated care

Kim was referred to Terry, a Specialty Case Management nurse. She was available to answer all the questions Kim might have, and offer support and advice along the way. Since Kim and her family access providers in the Banner Health Accountable Care Network (BHN) as part of their coverage, Terry was able to get extra support from an Aetna Single Point of Contact case manager, as well as a BHN case manager. Together, they worked to coordinate Kim’s care from BHN oncology specialists, and chemotherapy at a BHN hospital. They also scheduled her transplant through a transplant facility in the BHN.

Due to their participation in the BHN, Kim’s providers made sure she received the services she needed, without running additional, unnecessary tests. Terry provided education and support to Kim and her family to be sure she was in her best health, both pre- and post-surgery. It was a relief to both Kim and her family that she was getting the best possible care.

Success and remission

After a successful course of treatment, Kim recovered and went into remission. Her family threw a party with friends and loved ones to celebrate her new lease on life.

Due to Kim’s type of cancer and her stem cell transplant, she requires lifelong follow-up care. But through case management and BHN providers, her healthcare team continues to collaborate on the follow-up care and support she needs to stay healthy.

Member Success Story #2: A Strong Survivor

Breast cancer is a scary diagnosis—especially when you live alone. But when a friendly voice at the other end of the phone offers support and encouragement, you gather the courage you need to be strong. This is the story of Julie and her case manager, Glen.

In her late 50s, Julie is in love with life. She spends her free time doing her favorite things: reading, taking her dog for long walks in the woods, and getting dinner with her friends. Julie’s divorced, her family all lives out of state and she’s on her own. So when a routine mammogram uncovered breast cancer, Julie was shocked but also afraid—what would it be like going through cancer treatment alone?

Support and encouragement

Julie’s doctor recommended a partial mastectomy and radiation, and Julie called Meritain Health to obtain precertification of her care. She was connected with an Oncology Case Management nurse named Glen. Julie explained her worries and Glen helped her find a top medical oncologist and hospital in the BHN network. He reassured Julie she was in good hands for her surgery and treatments.

Glen worked with Julie’s doctors to ensure all her treatments were best for her needs. Through regular contact with both Julie and her doctors, Glen monitored her health and checked she was getting to her treatments as scheduled. Glen also helped Julie understand her symptoms, plus how she could be her healthiest. Glen was always available to answer her questions and offer medical guidance. Together, they created a plan that combined rest, exercise and healthy eating—helping her body heal and recover from her surgery and radiation treatments.

Healthy once again

Julie made a full recovery and was able to return to work and daily life. Glen continues to follow up with her and her doctors to be sure she continues in good health.

Julie received top, coordinated care from her BHN providers and her case management nurse. This helped her beat cancer without complications or readmissions, and has saved Julie $17,232 on the cost of her care.
Begin your success story with Meritain Health

We work with plan sponsors every day to understand their unique population health needs and what’s driving up plan costs. As Advocates for Healthier Living, we help our clients build efficient health plan strategies. We offer easy-to-use healthcare and ancillary benefits your employees can use to lead healthy, productive lives.

To learn more, just contact your Meritain Health representative.

Advocates for Healthier Living

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Member success stories are based on actual member experiences. Names and information have been changed to protect the member’s privacy.

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The reference to previous outcomes made as a part of this communication does not guarantee success in any new or future case(s), as the result of each case depends upon many factors, including the facts of each case.

Case savings include managed savings and negotiated savings and follow guidelines prescribed by the Case Management Society of America (CMSA). Managed savings reflect avoidance of potential charges that are realized through the intervention/actions of the case manager. Negotiated savings reflect savings off actual charges that are negotiated by the case manager with an individual provider.

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