

COVID-19 Impact on Utilization and Health Outcomes

LVBCH Webinar





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SGeneia

A healthcare analytics and services company that focuses on improving systems to support **personalized, patient-centered care**.

We help health plans, hospitals, physician practices and employers **better collaborate and align** to lower cost, improve outcomes and restore the Joy of Medicine.







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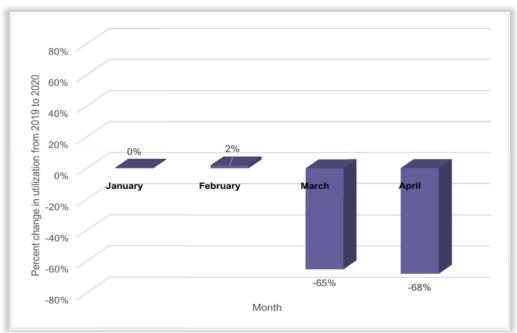
Agenda

- **COVID-19**
 - Utilization Changes
 - Employer Impact Financial
 - Health Outcomes
 - Cancer Screenings
 - Chronic Conditions
 - Employer Considerations



Healthcare Utilization and Revenue Impact: Fair Health

- March 2019 compared to March 2020
 - 65% decrease in utilization
 - 45% decrease in professional revenue



Monthly Percent change in utilization of Professional Services from 2019 to 2020, Nationally (Source: Fair Health)

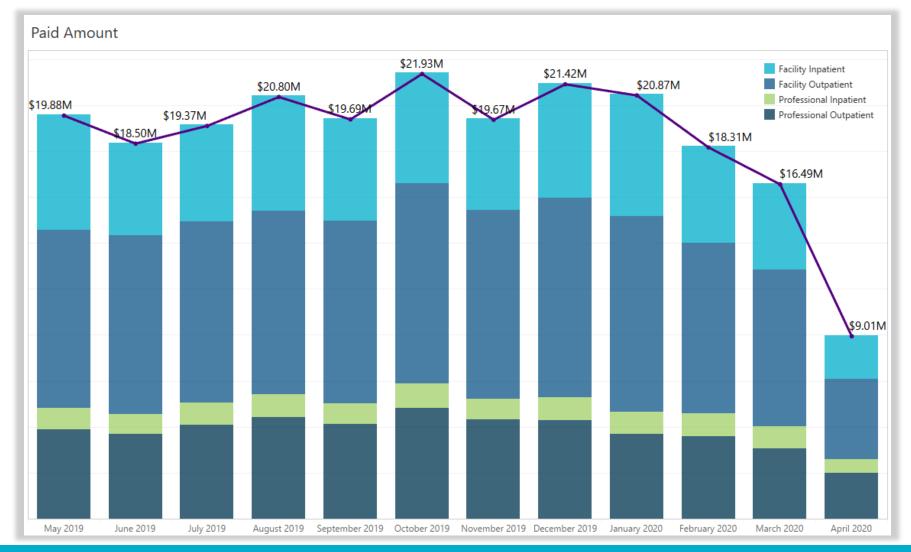
- April 2019 compared to April 2020
 - 68% decrease in utilization
 - 48% decrease in professional revenue



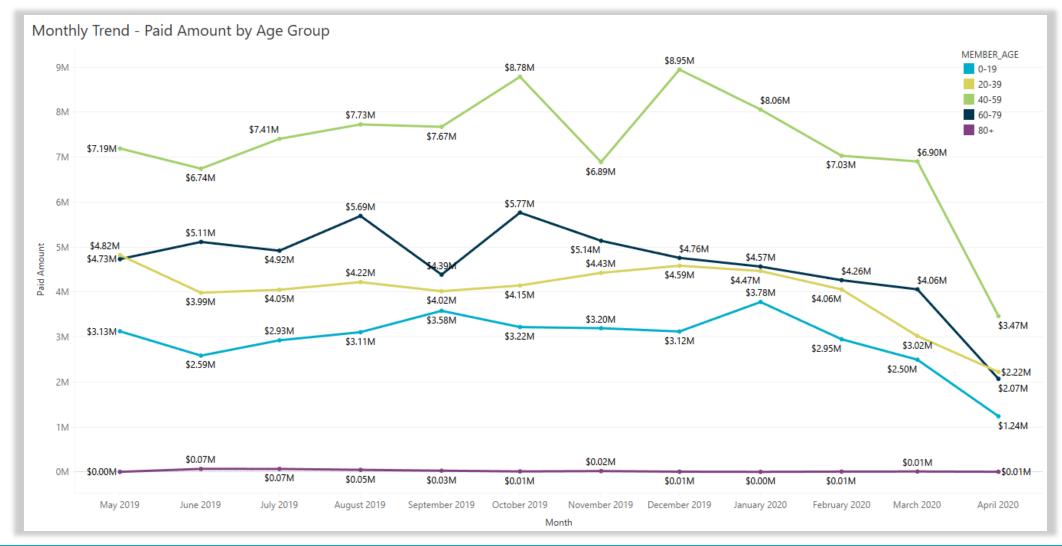
Monthly Percent Change in Professional Revenue Based on Total Estimated Allowed Amounts from CPI-Adjusted 2019 to 2020, Nationally (Source: Fair Health)



Medical Claims Paid Amount

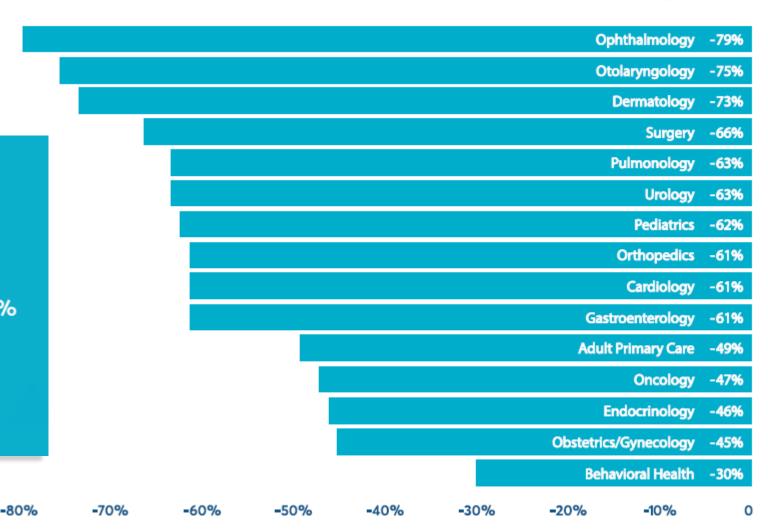


Medical Claims Paid Amount by Age Group



Ambulatory Care Visits: Geneia White Paper

Decline in Visits from Baseline to the Week of April 5th





Adult primary care declined 49%



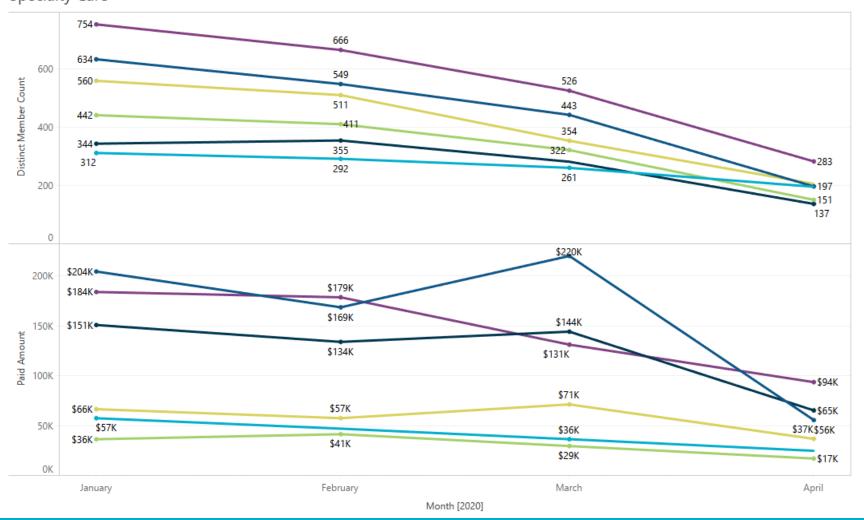
Oncology has decreased 47%



Specialty Care By Member Count and Paid Amount

The Theon® Platform Care Engager® Module: LVBCH Data Group

Specialty Care

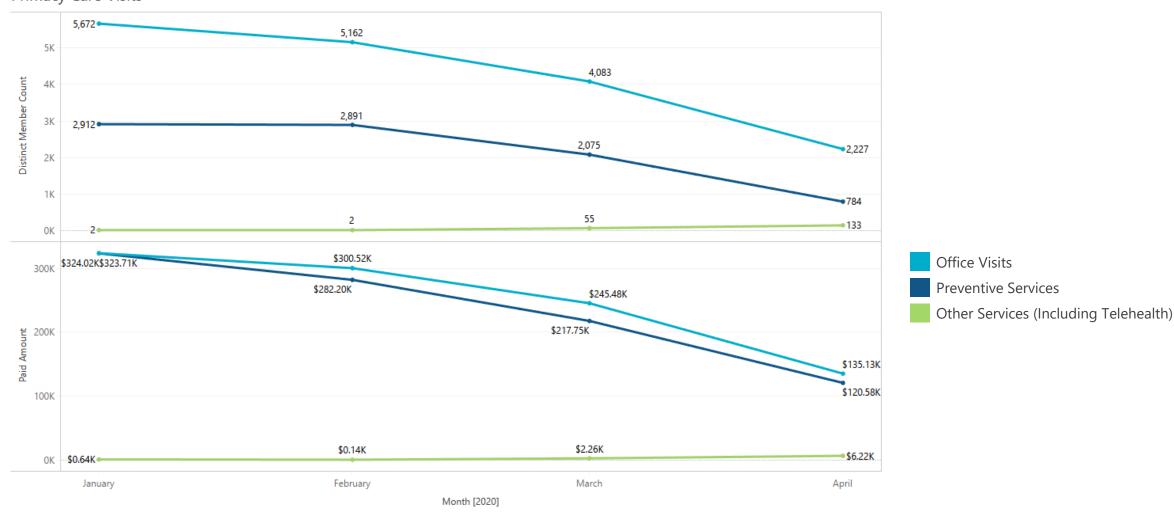


- Cardiology
- Orthopedic Surgery
- Dermatology
- Gastroenterology
- Obstetrics and Gynecology
- Pediatrics



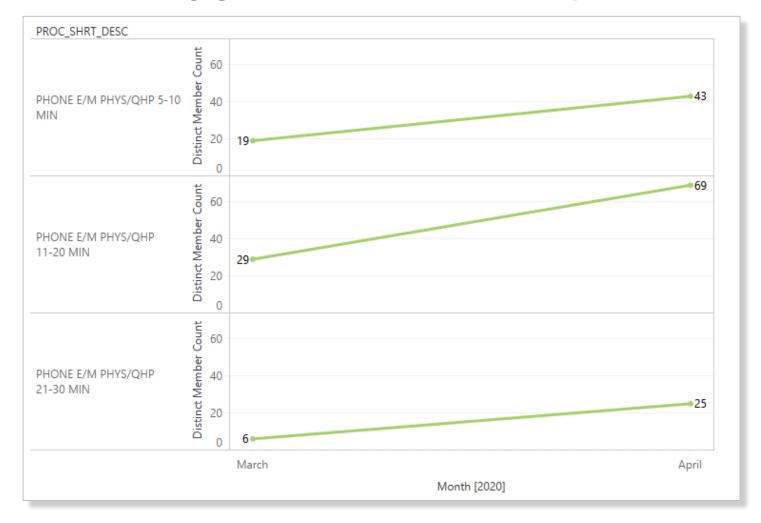
Primary Care By Member Count and Paid Amount







Primary Care By Member Count and Paid Amount



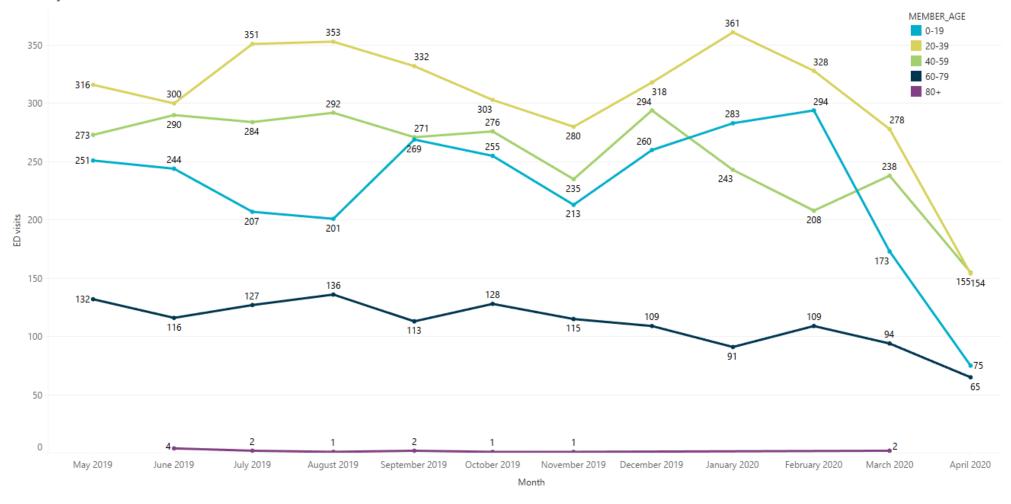




Emergency Department Visits by Age

The Theon® Platform Care Engager® Module: LVBCH Data Group

Monthly Trend - ED Visits





Financial Impact for Employers: Willis Towers Watson

- Initial estimates projected a potential 7% increase in healthcare expenditure
 - Infection level (# of infected individuals, severity of illness)
- Updated analysis indicates employer healthcare costs could decrease by as much as 4% in 2020
 - Infection level updated + Care deferral volume
- Significant volume of care remains deferred
- Monitor and budget for anticipated return of some services

1% Infection Level Cost Decrease: 1%-4%

15% Infection Level
Cost Variance:
+/- 1%

20% Infection Level Cost Increase: 1%-3%

Cancer Screening Impact: Epic Health Research Network

- Preventative cancer screenings dropped abruptly initially
 - 86% decline in colon cancer screenings
 - 94% decline in breast and cervical cancer screening
- Recent rise in screenings, but still lower than pre-COVID-19 levels
 - 29% lower for breast cancer screening
 - 36% lower for colon cancer screening
 - 35% lower for cervical can cancer screening
- Resulting "missed" screenings
 - 285,000 missed, 63% deficit in breast cancer screening
 - 95,000 missed, 64% deficit in colon cancer screening
 - 40,000 missed, 67% deficit in cervical cancer screening

"Lack of screenings and treatments could result in almost 10,000 excess deaths from breast and colorectal cancer in the next decade."

- National Cancer Institute Director Dr. Norman E. Sharpless



Chronic Condition Outcomes: Wellframe

- 57% **delayed** receiving services (by choice or doctor discretion)
- 26% had trouble accessing their doctor
- 52% report not having an effective plan for healthcare management
- 38% are **not fully confident** in their ability to manage their own care
- 74% are **motivated** to better manage their chronic condition
- 68% think virtual access to care support would increase selfmanagement of their healthcare plan
- 66% **would use** virtual care management for mental health difficulties



Geneia Resource: Provider Practice Considerations for Resuming Care

- 1. Anticipate and acknowledge patient fears
- 2. Make room for the emotional well-being of patients
- 3. Use identification and stratification analytics (identification and stratification)
- 4. Use an analytic model to determine patients at highest risk for severe COVID-19 impacts
- 5. Use technology to monitor at-risk patients
- 6. Prioritize patient outreach
- 7. Engage patients
- 8. Determine which visits need to be in-person
- 9. Leverage resources to address social determinants of health



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