



ADVANCED PRIMARY CARE

November 7, 2019

People with
access to
advanced
primary care are
healthier,
happier and cost
less money

BUT....Primary Care in This Country is Broken

- **Root cause of this dysfunction is the fee-for-service payment model**
 - Systemically undervalues primary care
 - Perverse volume incentives
 - No compensation for critical elements of effective primary care
 - Too many patients, too little time – immense patient frustration



Primary Care in This Country is Broken

- **This leads to:**
 - Exit strategies and constraints of 8 to 10 minute appointments
 - Delaying essential chronic care management
 - Wasteful ER/specialist/urgent care use
 - Redundant/dangerous tests, procedures, and medications



And Physicians Are Burning Out

79% of primary care physicians have reported symptoms of physician burn out

More than 1/3 of primary care physicians would not recommend a career in medicine to family and friends

Physician Burnout

By 2030, we will have a shortfall of between 14,800 and 49,300 primary care physicians nationally

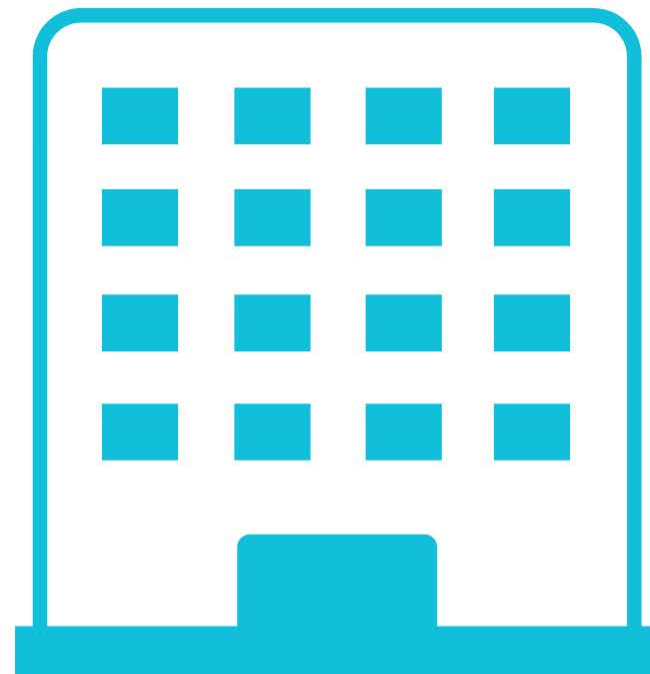
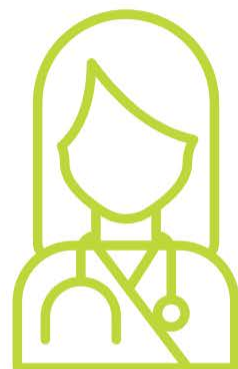
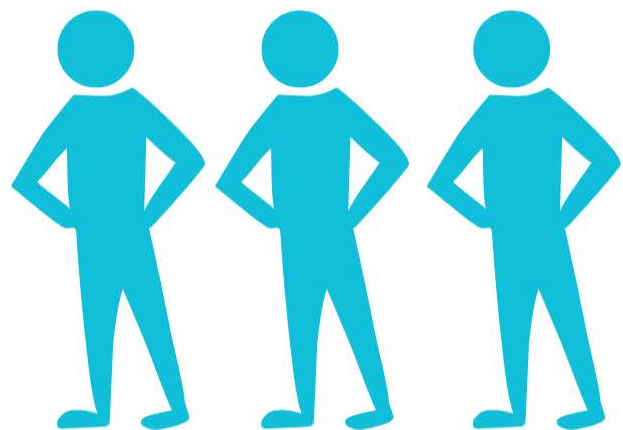


2018 Study, Association of American Medical Colleges

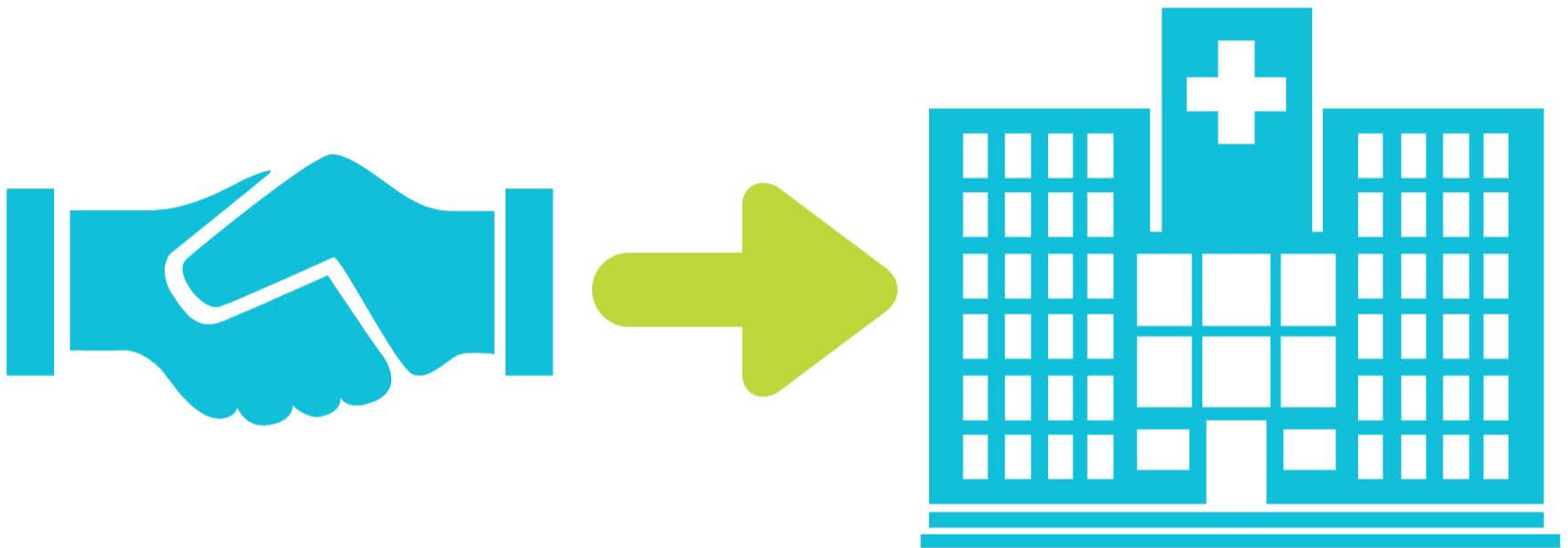
Forward-Thinking Employers Are Transforming Primary Care

- Liberating primary care from perverse incentives of fee-for-service payments
- Rewarding primary care doctors for superior clinical care, stewardship of overall healthcare spend and patient experience

Onsite and Near Site Clinics



Direct Contracting



Telemedicine



Near Home Direct Primary Care



Keys to Transformative Primary Care

- **Economics**
 - Breaking down financial barriers for patients
 - No co-pays/deductibles
- **Removing Access Barriers**
 - Fewer patients
 - Longer appointment times
 - Evening and weekend hours
 - Integrated, HIPAA compliant communication app
- **Ensuring Proper Financial Incentives for Doctors**
 - No fee-for-service
 - No downstream financial allegiances

Keys to Transformative Primary Care



Optimize care delivery for different patient segments



Train primary care teams to think & operate differently



Harness data & technology to enhance care

PATIENTS WHO EXPECT MORE AND DOCTORS WHO DELIVER MORE

How Advanced Primary Care Saves Money



**PROACTIVE
MANAGEMENT OF
CHRONIC CONDITIONS**

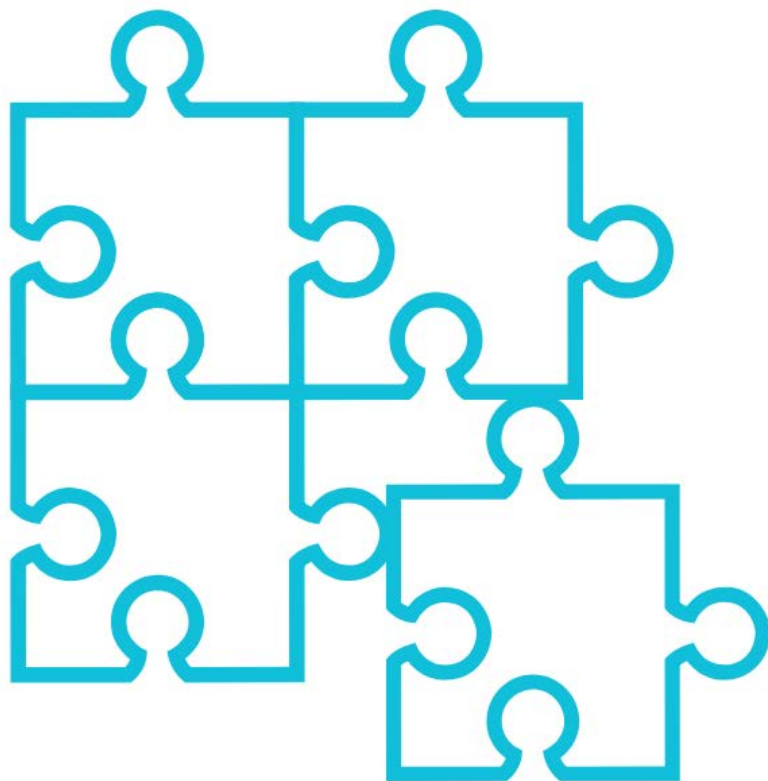


**PROVIDING HIGH VALUE
REFERRALS**



**REDUCING UNNECESSARY ER,
URGENT CARE, AND HOSPITAL
UTILIZATION**

Challenges

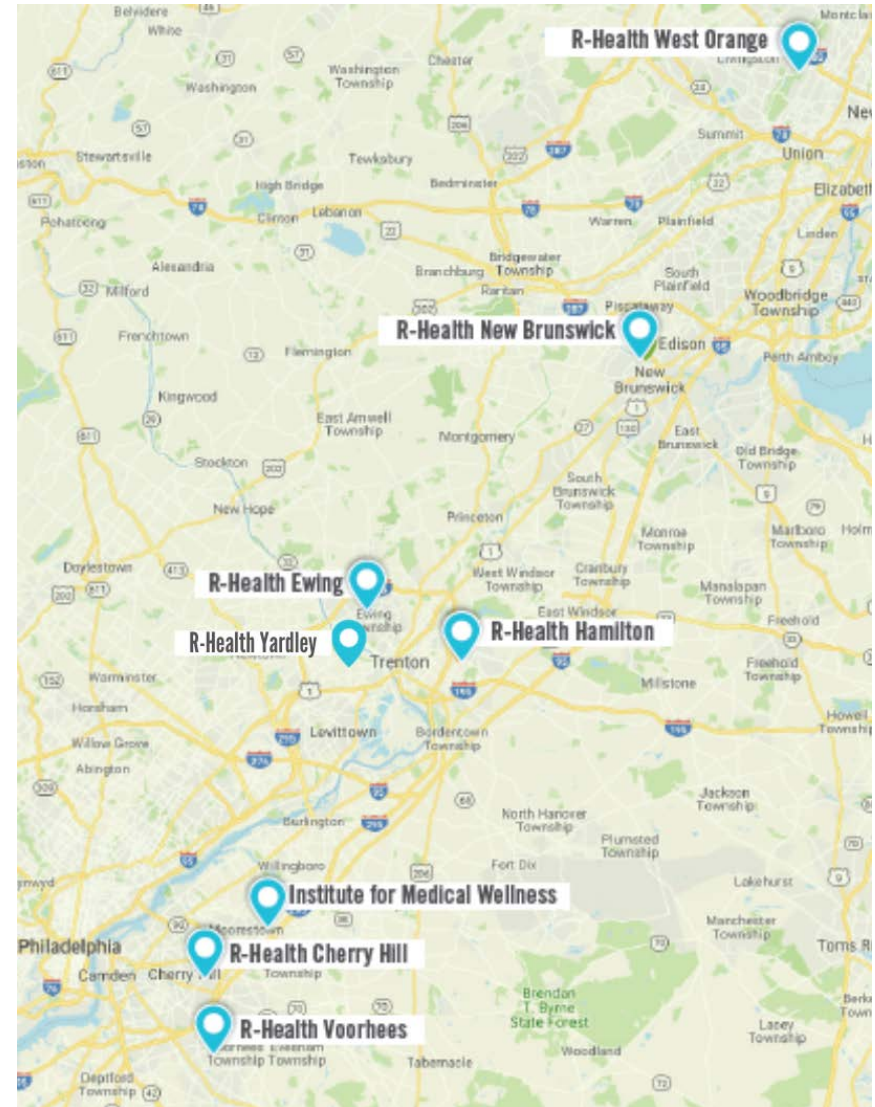


- Scale
- Consistent clinical quality

Case Study: State of New Jersey



The New Jersey State Health Benefits Program (SHBP) and School Employees' Health Benefits Program (SEHBP) offers employees and their covered dependents the opportunity to join an R-Health doctor's office at no additional cost.



State of NJ: Program Outcomes & Highlights



PRIMARY CARE
ENGAGEMENT
OVER 4X THE
NATIONAL AVERAGE

93% OF URGENT RISK
MEMBERS REDUCED
THEIR HEALTH RISK
QUOTIENT

61% OF MEMBERS WITH
HIGH CHOLESTEROL
HAVE REDUCED THEIR
CHOLESTEROL



State of NJ: Program Outcomes & Highlights



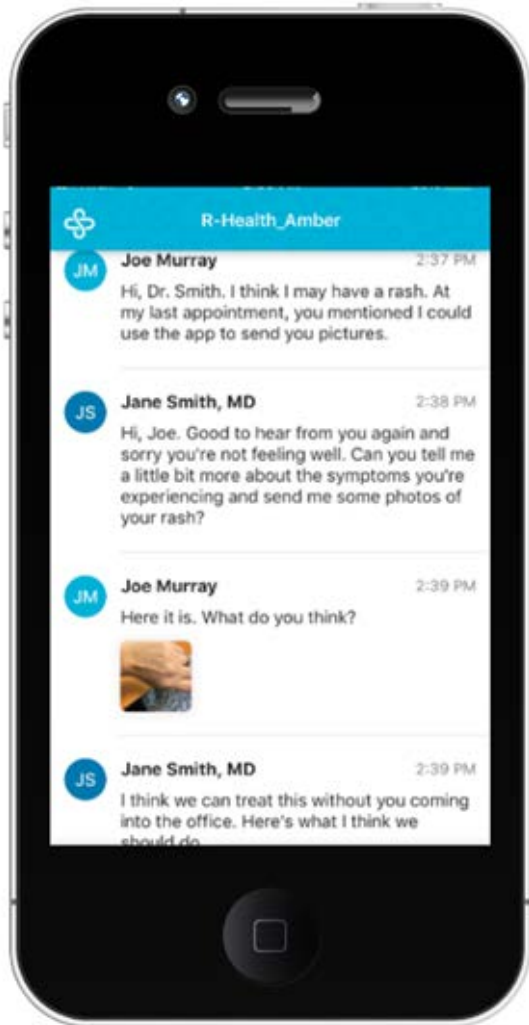
51% OF MEMBERS WITH UNCONTROLLED DIABETES MOVED FROM UNCONTROLLED TO CONTROLLED A1C LEVELS

43% OF MEMBERS DIAGNOSED WITH OBESITY HAVE DECREASED THEIR BMI

83% OF MEMBERS WITH HYPERTENSION HAVE CONTROLLED BLOOD PRESSURE



State of NJ: Program Outcomes & Highlights

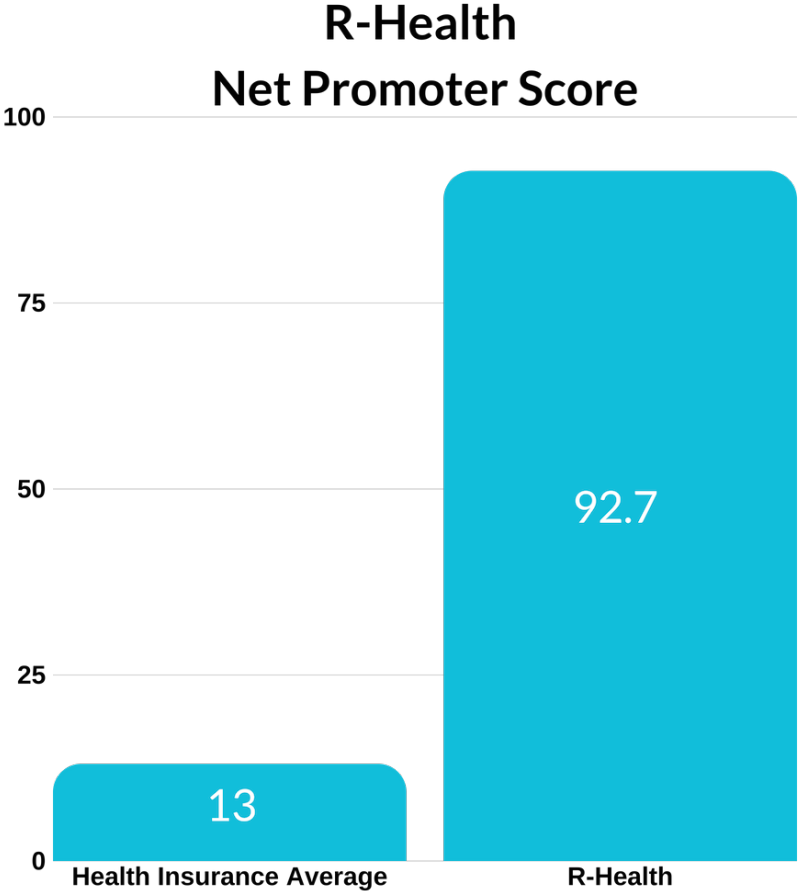


85,688 Spruce messages sent between the R-Health care team and members since the program inception

44% of NJ Employee members have secure Spruce accounts
(compared to 0.52% national telemedicine adoption rate for large employer health plans)*

**2018 Employer Health Benefits Survey, Kaiser Family Foundation*

State of NJ: Program Outcomes & Highlights



Member satisfaction with R-Health is high. R-Health measures this satisfaction through the Net Promoter Score (NPS), a standard benchmark for brand loyalty.

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*Data collected from post-appointment surveys since November 2018.
Industry average for health insurance from Satmetrix 2018 Net Promoter Benchmarks.*

State of NJ: Lessons Learned

- Strong collaboration with both employers and unions is critical
- People are skeptical of change – communication is key
- Strong data integration with TPA
- Integrate into overall plan design
- Create patient ambassadors at all levels of state government to support and promote the program
- Multi-year investment is essential

Choosing a Partner

- Robust data & technology platform
 - Integrating data feeds from multiple sources
 - EMR
 - Claims
 - Communication
 - Administrative/eligibility
 - Generate actionable clinical information
 - Reporting
- Proactive population health workflows
- Clinical collaboration & oversight
- System independence
- Experience integrating behavioral health







THANK YOU



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