



ValidationInstitute

2024 Validation Report

Review for: BlueCross BlueShield of South Carolina

Validation Achieved: Outcomes

Valid through: January 2025



Company Profile



South Carolina

Category:	Disease Management
Website:	https://www.southcarolinablues.com/
Public or Private:	Private
Year Established:	1946
President:	Scott Graves
Company contact:	Kerri Cameron
Description:	

For more than six decades, **BlueCross BlueShield of South Carolina** has been part of the national landscape. Our roots are firmly embedded in the state. We are the largest insurance company in South Carolina. We are also the only one that has an A+ Superior A.M. Best rating. We are one of the nation's leading government contract administrators. We operate one of the most sophisticated data processing centers in the Southeast and have a diverse family of subsidiary companies.





Claim Assertion for Validation

Working through BlueCross BlueShield of South Carolina, a large South Carolina health plan has achieved noticeably better outcomes, as measured by the Validation Institute's standard chronic disease medical event rates metric, than would be predicted given their demographics.





Method / Calculation / Examples

The standard metric is to measure primary-coded ER and inpatient event rates for the five common chronic diseases – asthma, coronary artery disease, chronic obstructive pulmonary disease, congestive heart failure and diabetes. This metric is VI-guaranteed to be the most valid way to measure the overall impact of an organization’s efforts to improve chronic disease outcomes. (It can’t discern what an organization did to achieve the results. It is observational only.)

The data extraction algorithm, which has been adopted by entities as diverse as Health Affairs (publication of a study of Barnes Jewish Christian Health System done by Harvard Medical School researchers) and the wellness industry trade association, is available upon request to the Validation Institute. The ICD-10 codes that were used were as follows:

Chronic Condition	ICD10 Codes (include all subcategories)
Asthma	J45
Chronic Obstructive Pulmonary Disease	J40, J41, J42, J43, J44, J47, J68.4
Coronary Artery Disease (and related heart-health issues)	I20, I21, I22, I23, I24, I25.1, I25.5, I25.6, I25.7
Diabetes --including likely non-cardiac complications	E10, E11.0-E11.9, E16.1, E16.2, E08.42, E09.42, E10.42, E11.42, E13.42, E08.36, E09.36, E10.36, E11.311, E11.319, E11.329, E11.339, E11.349, E11.359, E11.36, E13.36, I03.119, I03.129, I96, E08.621, E08.622, E09.621, E09.622, E10.621, E10.622, E11.621, E11.622, E13.621, E13.622, L97
Hypertension, Heart Failure and related diseases	I50, I10, I11, I12, I13





Method / Calculation / Examples

One could argue that some of these codes (selected more for sensitivity than specificity) should have been excluded and/or others included, but adjusting the codes in that manner would not materially change the result.

The chronic disease event rates were compared to other state governments. And also internally to a cohort of BlueCross BlueShield of South Carolina members that have the same network and access to the same care management programs.





Findings & Validation

The event rates were more than 10% lower Southern benchmarks. The event rates were also more than 10% lower than the internally benchmarked cohort. The internally benchmarked population had a much lower “elderly” cohort (<22% of the population being 50 to 64.9 years old, vs. >26% for the large South Carolina health plan). Both groups would be considered adversely selected.

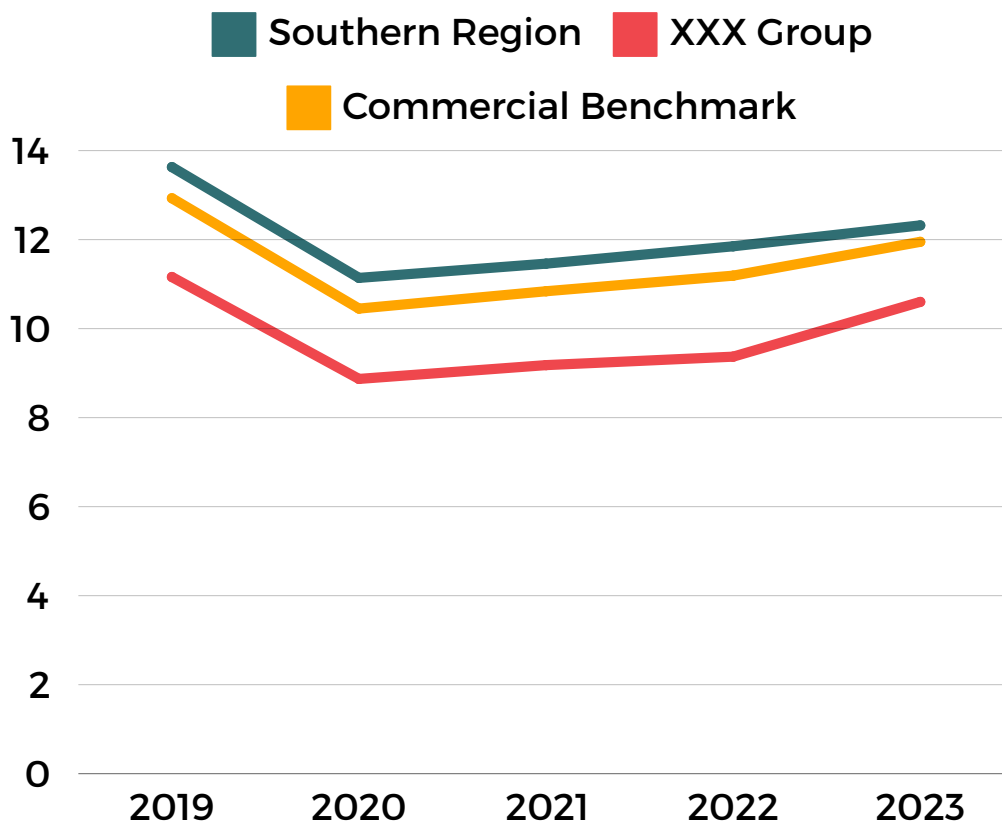


Chart 1: Total Events vs. national averages (events per 1000 members <65)





Limitations

While the methodology is valid, and benchmarked internally and externally, there is no firm conclusion for causality. This is an observational analysis.





Validation and Credibility Guarantee

Blue Cross Blue Shield South Carolina's large South Carolina health plan achieved validation for **Outcomes**. Validation Institute is willing to provide up to a \$50,000 guarantee as part of their Credibility Guarantee Program. To learn more, visit <https://validationinstitute.com/credibility-guarantee/>

Program Validation

Program has strong evidence of significant impact on both patient outcomes and on medical costs. Evidence is assessed based upon the certainty it provides that the result is due to the program and not to other factors, such as recruiting people to participate in the program who are most likely to succeed.

Savings

Can reduce health care spending per case/participant or for the plan/purchaser overall.

Outcomes

Product/solution has measurably improved an outcome (risk, hba1c, events, employee retention, etc.) of importance.





Validation Expiration: January 2025

CERTIFICATE OF VALIDATION

Applicant: **Blue Cross Blue Shield South Carolina**
I-20 E at Alpine Road, Columbia, South Carolina
29219, US

Product: Large South Carolina health plan

Claim: Working through Blue Cross BlueShield of South Carolina, the large South Carolina health plan has achieved noticeably better outcomes.

Validation Achieved: **Validated for Outcomes**

Validation Award Date: January 2023

Al Lewis
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Validation Institute

Vidar Jorgensen
Chief Executive Officer
Validation Institute





About Validation Institute

Validation Institute is a professional community that advocates for organizations and approaches that deliver better health value - stronger health outcomes at lower cost. We connect, train, and certify health care purchasers, and we validate and connect providers delivering superior results. Founded in 2014, the mission of the organization has consistently been to help provide transparency to buyers of health care.

Validation Review Process

Validation Institute has a team of epidemiologists and statisticians who review each program. The team focuses on three components:

- Evidence from published literature that a similar intervention had similar results.
- The reliability and credibility of the data sources.
- The rigor of the approach to calculating results.

To achieve validation, the program has to satisfy each of these components. VI's team then summarizes the review into a report which is publicly available. Details of VI's review are available with the program's permission.

