



ValidationInstitute

2023 Validation Report

Review for: Ochsner Health
Validation Achieved: Savings
Valid through: July 2024

Executive Summary



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Claim Assertion of Validation

Ochsner Digital Medicine chronic disease management program participants have lower per member per month costs than similar (matched) non-participants.

Validation Achieved:

Savings

Program

Ochsner Digital Medicine chronic disease management program

Highlights of the Findings

- In the first year, the hypertension treatment group's total costs (medical and pharmacy) were lower than the control group's costs. For the Medicare Advantage and MSSP groups, the difference was statistically significant.
- In the diabetes program, the Medicare Advantage treatment group members had significantly lower medical costs than the control group; the MSSP treatment group members had lower costs than the control group but the difference was not significant.

Keep in mind

The people voluntarily enrolled in the programs and may have traits that helped them be more successful in achieving the target outcomes than people who did not enroll.

Company Profile



Category:	Disease Management
Website:	http://ochsner.org/digital-medicine
Public or Private:	Private
Year Established:	2015
CEO:	Pete November
Company contact:	866-273-0548

Description:

Ochsner Health is an integrated healthcare system with a mission to Serve, Heal, Lead, Educate and Innovate. Celebrating 80 years in 2022, it leads nationally in cancer care, cardiology, neurosciences, liver and heart transplants and pediatrics, among other areas. **Ochsner** is consistently named both the top hospital and top children's hospital in Louisiana by U.S. News & World Report. The not-for-profit organization is inspiring healthier lives and stronger communities. Its focus is on preventing diseases and providing patient-centered care that is accessible, affordable, convenient and effective. **Ochsner Health** pioneers new treatments, deploys emerging technologies and performs groundbreaking research, including over 700 clinical studies. It has more than 34,000 employees and over 4,500 employed and affiliated physicians in over 90 medical specialties and subspecialties. It operates 40 hospitals and more than 300 health and urgent care centers across Louisiana, Mississippi and the Gulf South; and its cutting-edge Connected Health digital

Company Profile

medicine program is caring for patients beyond its walls. In 2021, **Ochsner Health** treated more than 1 million people from every state and 75 countries. As Louisiana's top healthcare educator, **Ochsner Health** and its partners educate thousands of healthcare professionals annually.

Ochsner Connected Health's chronic condition management program provides one-on-one, personalized care to manage conditions such as high blood pressure, dyslipidemia, and Type 2 diabetes without making multiple doctor trips. Built in 2015 as an internal quality initiative, **Ochsner's** program allows chronic condition care to be removed from the primary care setting while keeping the member's provider abreast of critical information relative to their patient. The result is the ability to deliver proven outcomes from a Center of Excellence health system anywhere in the country. Members enroll via a virtual visit with a clinician to determine clinical eligibility, fill out easy, detailed surveys on their health, demographic, and socioeconomic factors, then receive a digital device such as a blood pressure cuff or glucometer. Through digital and traditional outreach, members are encouraged to take readings on their own time, drastically increasing the data points to manage the conditions. These readings are fed to a care team consisting of a clinician licensed in their state for medication management and a health coach to manage diet, stress, exercise, and other lifestyle factors. **The Ochsner Care Team** manages the condition and then electronically feeds the pertinent notes and information to the primary doctor to close the loop on overall member care.



Claim Assertion for Validation

Ochsner Digital Medicine chronic disease management program participants have lower per member per month costs than similar (matched) non-participants. This analysis focused on patients who were covered by Medicare Advantage, Medicare Shared Savings Program, and an employer's health plan.





Method / Calculation / Examples

Members of a Medicare Advantage plan, a Medicare Shared Savings Program (MSSP) Accountable Care Organization, and an employer's health plan were invited to join the Ochsner Digital Medicine chronic disease program.

Members who had health insurance claims for diabetes and/or high blood pressure were invited. Members who had both conditions were tracked in the condition that they first enrolled under.

A total of 529 members with diabetes enrolled and 2,915 members with high blood pressure in the digital program; the comparison (control) diabetes group had a total of 5,544 members and the hypertension control group had 15,400 members.

Participants were matched to non-participants using age, gender, race, other health conditions, HCC interactions, prospective risk score, and race.

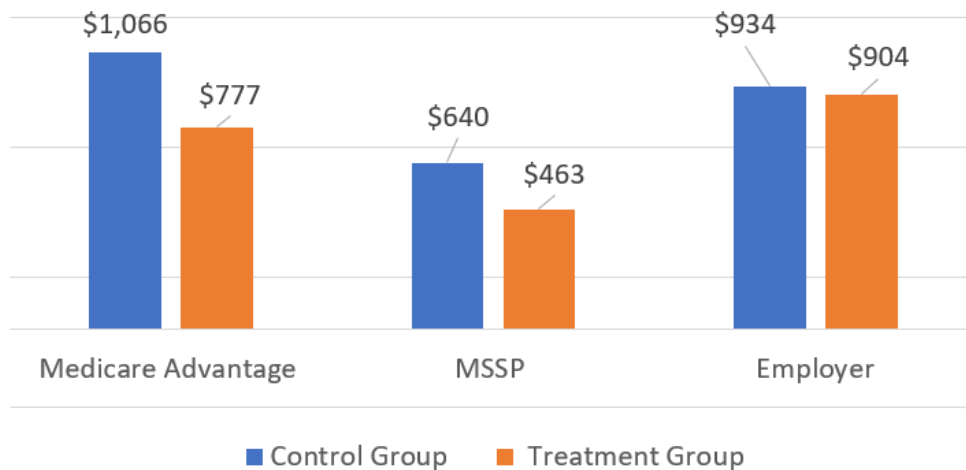
Participants' total medical costs for the first year of the program were compared to those of matched non-participants.

Data came from their insurance claims, electronic medical records, and surveys. The insurance claims provided data for emergency department visits, hospital admissions, inpatient days, and office visits. The electronic medical record provided data on blood glucose control and blood pressure control.



Findings & Validation

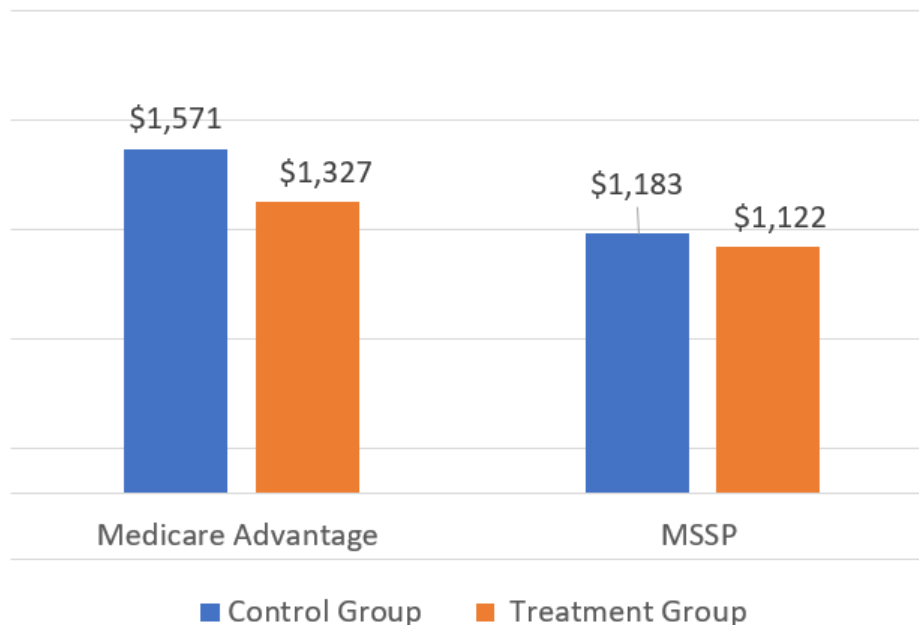
In the first year, the hypertension treatment group's total costs (medical and pharmacy) were lower than the control group's costs. For the Medicare Advantage and MSSP groups, the difference was statistically significant.



Graph 1: Hypertension PMPM Costs

Findings & Validation

In the diabetes program, the Medicare Advantage treatment group members had significantly lower medical costs than the control group; the MSSP treatment group members had lower costs than the control group but the difference was not significant.



Graph 2: Diabetes PMPM Costs

Limitations

The people voluntarily enrolled in the programs and may have traits that helped them be more successful in achieving the target outcomes than people who did not enroll.



Validation and Credibility Guarantee

Ochsner Digital Medicine chronic disease program achieved validation for **Savings**. Validation Institute is willing to provide up to a \$25,000 guarantee as part of their Credibility Guarantee Program. To learn more, visit <https://validationinstitute.com/credibility-guarantee/>.

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.

Metrics

Credible sources and valid assumptions create a reasonable estimate of a program's impact.

Contractual Integrity

Vendor is willing to put a part of their fees "at risk" as a guarantee.





Validation Expiration: July 2024

CERTIFICATE OF VALIDATION

Applicant: Ochsner Health
21450 Poydras Street, Suite 136
New Orleans, LA 70112

Product: Ochsner Digital Medicine chronic disease program

Claim: Ochsner Digital Medicine chronic disease management program participants have lower per member per month costs than similar (matched) non-participants.

Validation Achieved: Validated for Savings

Validation Award Date: September 2022

Linda K. Riddell, MS
VP, Population Health Scientist
Validation Institute

Benny DiCecca
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.