



ValidationInstitute

2021 Validation Report

**Review for: Ault International Medical
Management (AIMM)**

Validation Achieved: Level 1 - Savings

Valid through: October 2022



Company Profile



Category:	Care Management
Website:	http://aim-m.com
Year Established:	2003
Public or Private:	Private
CEO:	Deb Ault
Company contact:	info@aim-m.com
Description:	

AIMM builds medical management programs to the unique specifications of each individual group. By understanding the client's culture, population, goals, objectives, and budget, **AIMM** formulates a medical management strategy that is the best possible fit for them, and will generate the results they need to achieve. Tweaking and modifying the program as services progress ensures optimal success. All AIMM services are centered on the concepts of being patient-centric, comprehensive, holistic, and fully integrated. **AIMM** understands that the most effective, most well received, medical management programs are "Patient Centric". Therefore, **AIMM's** programs focus on identification of patients who could benefit from the individualized attention and assistance of a professional Nurse in controlling their health condition(s).





Claim Assertion for Validation

Health plans that use AIMM services have lower Per Employee Per Year (PEPY) costs than published benchmarks.





Method / Calculation / Examples

The Per Employee Per Year medical and pharmacy cost for AIMM plans was calculated. For each plan type (P3CM Standard, P3CM Platinum, Overlay), level of care management (loose, moderate, and well) and claim repricing strategy (PPO, RBP), multiple employers were included. A total of 16,654 employees were included in the calculation.

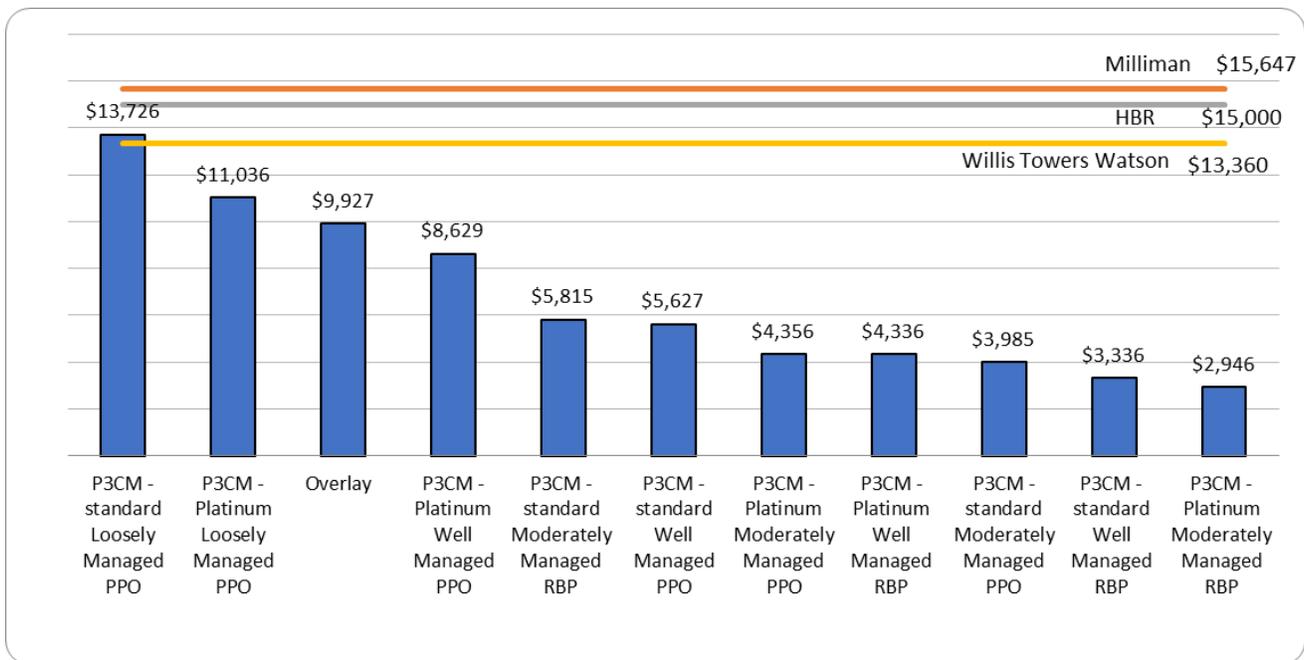
Three published rates from used for comparison: Milliman Medical Index (Milliman, 2021), Willis Towers Watson (Willis Towers Watson, 2020), and Harvard Business Review (Harvard Business Review , 2020). The rates were adjusted to estimate a PEPY rate, when the published rate was shown on a different basis (e.g., per person).





Findings & Validation

Except for the AIMM’s Standard plan loosely managed, all of AIMM’s plans PEPY were lower than the published benchmarks. See Graph 1. The standard, loosely managed plan at \$13,726 was slightly higher than Willis Towers Watson’s benchmark, \$13,360.



Graph 1 Per Employee Per Year Costs – AIMM plans/ Published Benchmarks



Limitations

This analysis does not address how AIMM's covered lives or benefit plans may differ from those reflected in the published benchmark rates.



Validation and Credibility Guarantee

Ault International Medical Management achieved level 1 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/>.

Level 1 – Savings

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

Level 2 – Outcomes

Product/solution has measurably moved the needle on an outcome (risk, hba1c, events, employee retention, etc.) of importance.

Level 3 – Metrics

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

Level 4 - Contractual Integrity

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





Validation Expiration: October 2022

CERTIFICATE OF VALIDATION

Applicant: **Ault International Medical Management**
1491 Polaris Parkway, Box 213, Columbus, OH
43240, US

Product: AIMM's service

Claim: Health plans that use AIMM services have lower Per Employee Per Year (PEPY) costs than published benchmarks.

Validation Achieved: **Level 1 - Validated for Savings**

Validation Award Date: October 2021

Linda Riddell
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.