

When Health & Lifestyle CONVERGE: **Creating a health ecosystem for seniors** William Fleming, PharmD

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Overview

- Industry Landscape & Trends
- Today's Senior
- Highest Impact Areas
- A New Ecosystem & Care Model

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Healthcare industry being shaped by big trends



Rising customer expectations

Ease, convenience, affordability, and simplicity





Industry capacity constraints intensify

Shortage of healthcare professionals



6



Digital proliferation & big data mature

New technology and prevalence





Growing government business

Government spending and coverage increase while margin compresses

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Integration accelerates, and new upstart innovators proliferate

Mega-mergers, partnerships & disruptive innovators

Evolution toward value-based care

Slow but steady transition continues

Blurring of lines between pharmaceutical and medical management

Drug spend and management increasingly critical to control medical cost

Senior lifestyles being shaped by big trends

Seniors are ...

- Facing rising burden of chronic disease
- Living and working **longer**
- Having less financial means in retirement 3
- Seeking experience **on par w/other industries**
- Rapidly adopting **convenient technologies**

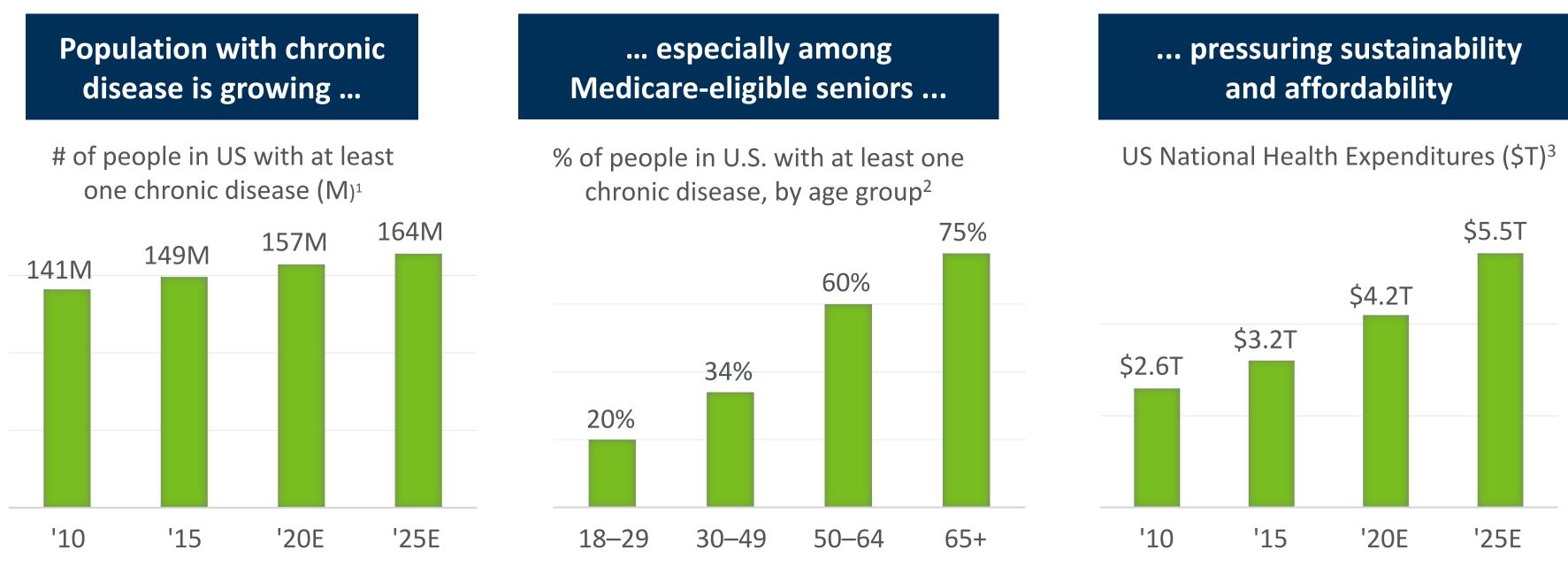


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- Whole-person care, throughout their lives Engagement & care **where they are** (home) **Confidence & security** in product design
- **Personalized** care, support, and service
- **Tech-enabled** access to care & services

Senior health: Chronic conditions & aging population impacting healthcare costs



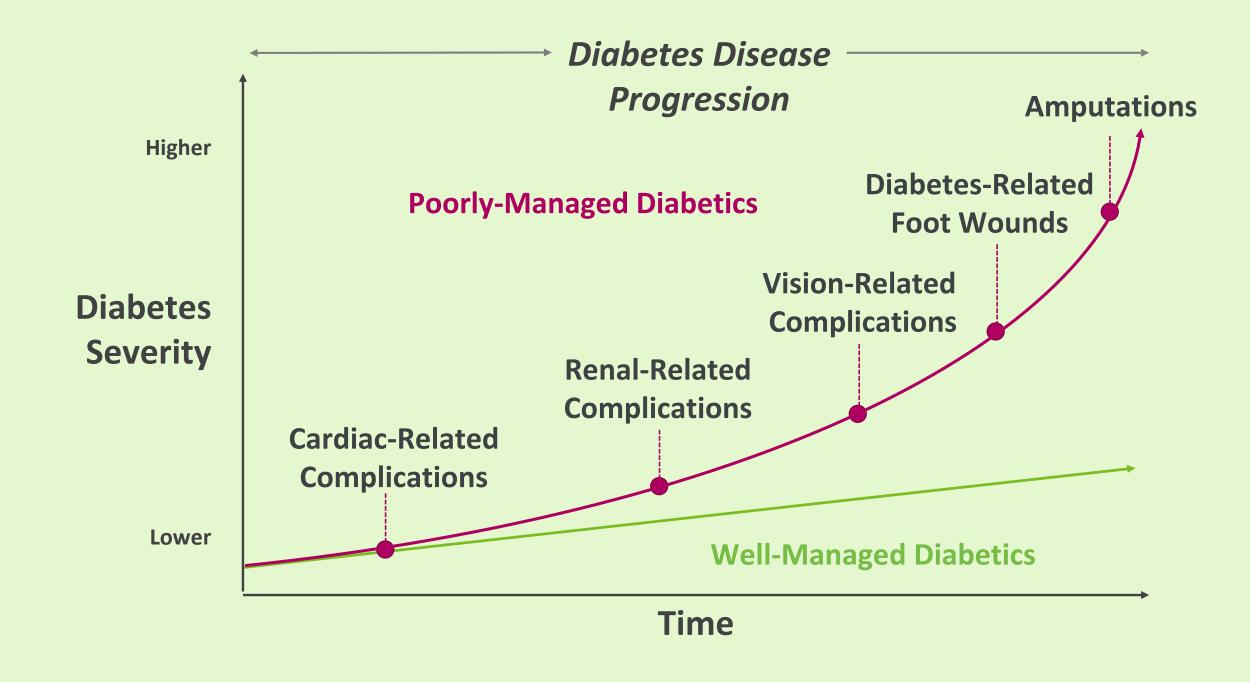
Chronic disease is a primary driver of increasing costs in the US healthcare system

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1. Partnership to Fight Chronic Disease 2. Pew Research (2013) 3. CMS

Example: Well-managed vs. poorly-managed chronic condition

Quality of life and cost implications of unmanaged diabetes¹



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1) Analysis is limited to active Humana membership at any point in 2018 and members diagnosed with Type-II Diabetes; 2) PMPM: Per member per month cost (Allowed Amount) in 2018

Senior health



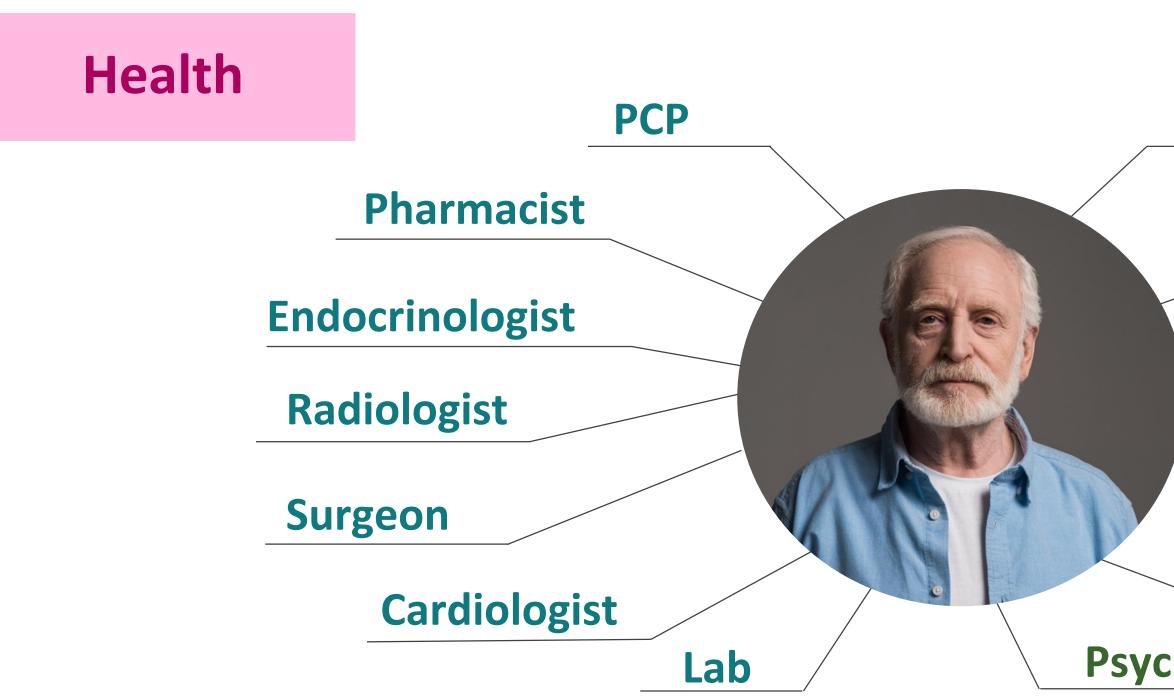
Cost (PMPM)²

High Severity \$4,641

Medium Severity \$1,805

> **Low Severity** \$589

Senior health + lifestyle meet a complex system that doesn't meet their needs



Dis-integrated. Conflicted. Focused on episodic care.

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Lifestyle



Loneliness

Mobility

Food Insecurity

Physical Activity

Psychologist



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Meet our Medicare member, Jo

Integrated Value-Based PHARMACY Health Ecosystem 50% of seniors find medadherence challenging **5 Greatest Areas of** Technology **Influence on Health** Data **HOME HEALTH PRIMARY CARE** 80% of seniors have 10% of our members 2+ chronic conditions receive home health **SOCIAL BEHAVIORAL DETERMINANTS** HEALTH 1 in 8 Americans is Analytics 39% of our MA food-insecure members are lonely

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Solution:

✓ Greatest impact on quality and outcomes

✓ High-frequency, low-cost

✓ Relationship-based, high influence

✓ Focused on chronic condition management

Evolve our operating model



Provide clinical services for **all life stages**

Offer a differentiating primary care model

Enable more care in the **home**



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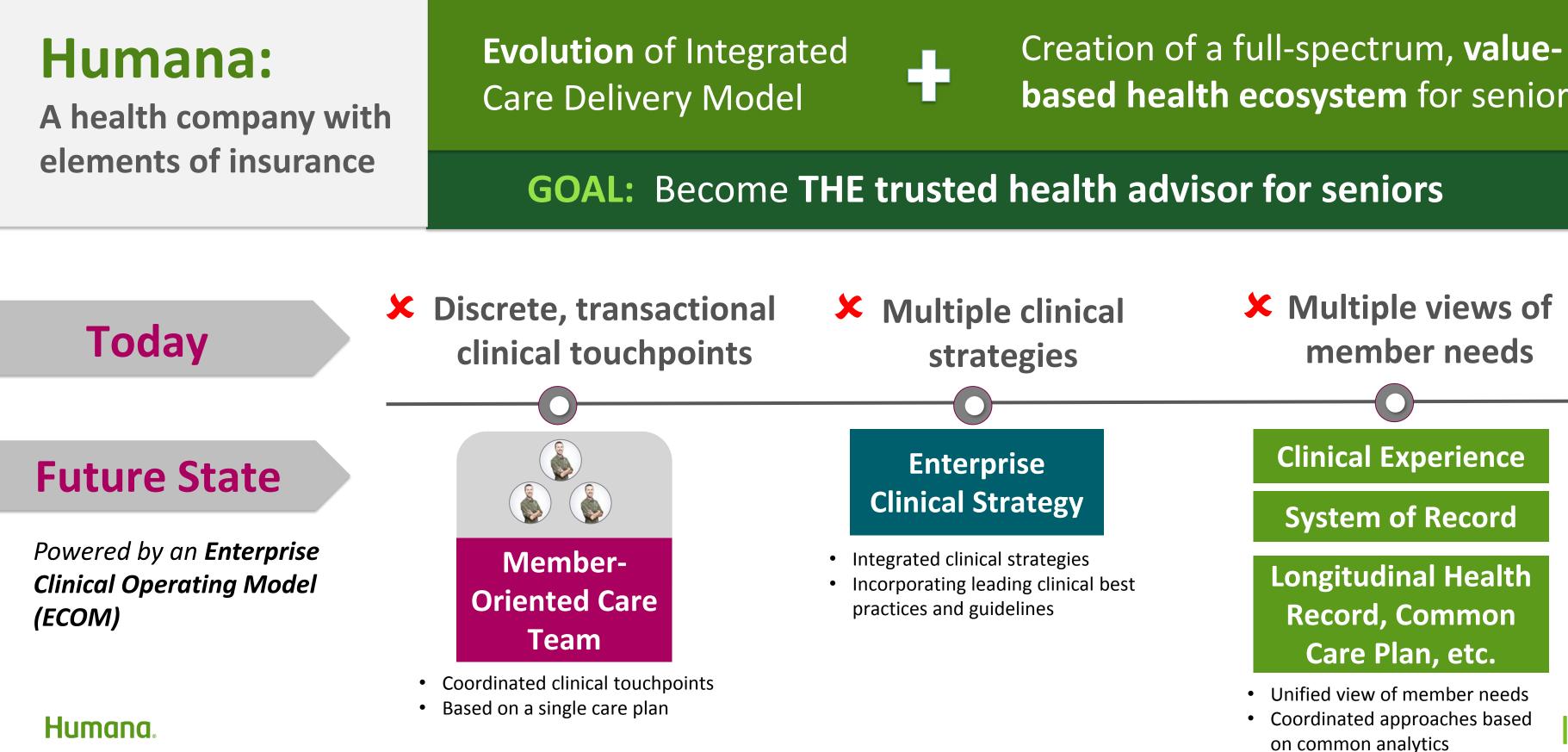
So how do we do this?



Continue to push forward with **Bold Goal**

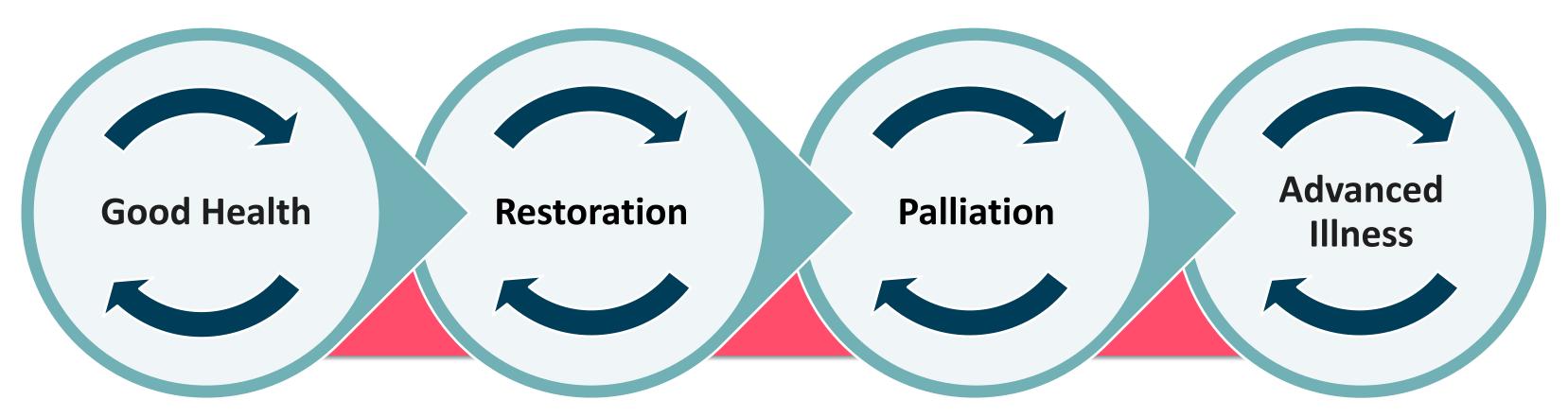
Address **social determinants** of health

Enterprise-wide, customer-focused integration is key to new operating model



based health ecosystem for seniors

Meet them where they are: Provide clinical services for all stages of their lives



- Pharmacy
- Wellness programs
- Disease screenings
- Immunizations
- Go365®

- Pharmacy
- Well Dine®
- Transitions care
- Clinical review

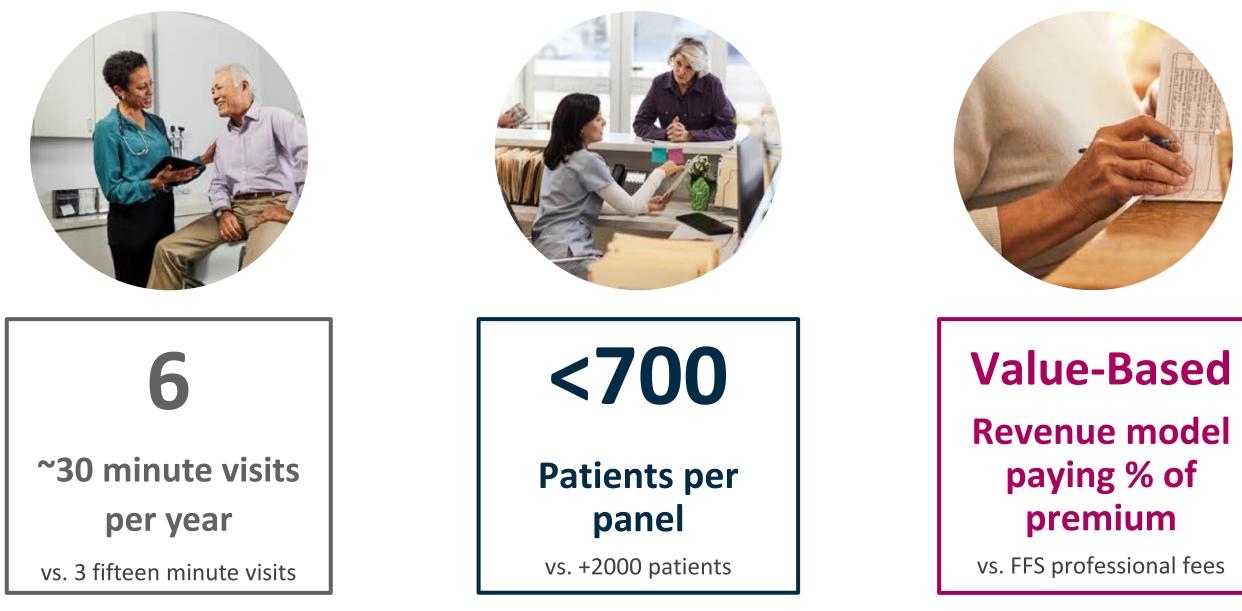
- Pharmacy
- Condition-specific
 - integrated care teams
- Trigger-based care
- In home and palliative care

Expanded care with more services done in home, where members want to be

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- Pharmacy
- Hospice care

Provide a differentiating model of **primary care** Senior-focused primary care vs. typical primary care provider



Model serves high utilization populations to impact trend

21% lower avoidable admissions per 1,000 vs. unengaged providers¹ 15% lower ER visits per 1,000 vs. unengaged providers¹

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1) Jan to Oct 2018 Humana proprietary primary care providers vs. unengaged providers



Integrated

Holistic teambased care

vs. fragmented care, reliant on referrals



Enable more care **in the home**

Seniors want to stay in their home

- homes¹

Shifting away from facility-based care

- healthcare
- options

• 90% of seniors want to live out their lives in their

• 53% of seniors cite health problems as the top threat to their independence²

• Technological advancements are enabling more treatment options in the home

• It's the only setting that integrates lifestyle and

• Low-cost setting compared to other care delivery

^{1.} https://assets.aarp.org/rgcenter/ppi/liv-com/ib190.pdf

New frontier, new investments: Home health and hospice

Home Health Opportunity

of seniors intend to continue living in their current home or community¹

Most convenient setting for seniors

Makes care more affordable

Technology enabling a **broader** offering of in-home services

Powerful point of influence

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Medicare Certified Home Health and Hospice:

- Episodic encounters
- Skilled nursing
- Clinical intervention
- Hospice and palliative care

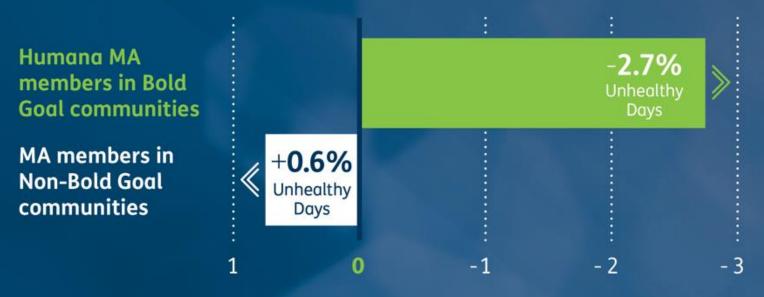
Longitudinal care management:

- Reinforcement of care plans
- Remote monitoring
- Access to care
- Hospice

Continue to push forward with our Bold Goal

OUR BOLD GOAL is a health and business strategy dedicated to improving the health of the communities we serve 20 percent by 2020 and beyond.

Since 2015, Humana Medicare Advantage members* in Bold Goal communities continue to have more Healthy Days than those in non-Bold Goal communities



-20%

0%

-5%

-10%

-15%

Humana employees achieved their Bold Goal in 2018

gaining 2.3 million more Healthy Days between 2012 and 2018

2018 screened



*Humana contracts with CMS under the Medicare Advantage program to provide a comprehensive array of health insurance benefits—including wellness programs, chronic care ement, and care coordination—to Medicare eligible persons under HMO, PPO, and Private Fee-For-Service, or PFFS, plans



Unhealthy

Davs



In San Antonio, Humana MA members experienced a **9.8 percent reduction**

in Unhealthy Days (UHD); they are halfway toward their Bold Goal of being 20 percent healthier

We scaled social determinants of health screenings, impacting thousands, and connected those in need to community resources

2019 goal: 1 million people screened

Address social determinants of health (e.g., food insecurity, social isolation)

Focus on addressing key social determinants of health in local markets

- 12 **Bold Goal markets**
- Participating community +550 organizations
- Members screened for +500k food insecurity in 2018

Bold Goal has matured from an aspiration to a critical piece of the operating model

National Partnerships







American Diabetes



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Healthy Days improving faster in Bold Goal communities¹ (vs. non-Bold Goal)

Local Market Partnerships







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Humana's Bold Goal: **San Antonio**

Great Bold Goal work is happening here, too: Louisville

- Louisville Bold Goal efforts launched in 2015.
- Work has primarily focused on improving respiratory health, coordination of care, diabetes, and behavioral health.
- Locally, Humana is proud to convene and be a part of – with more than 70 local organizations – the Louisville Health Advisory Board (LHAB), a collective impact body seeking to improve the health of our community.
- We also engage our **12,000+ local employees** in this effort, so they might see how they contribute to this larger goal, in their day-jobs and through community engagement.



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A sampling of LHAB community partners

Q&A





Thank you!

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