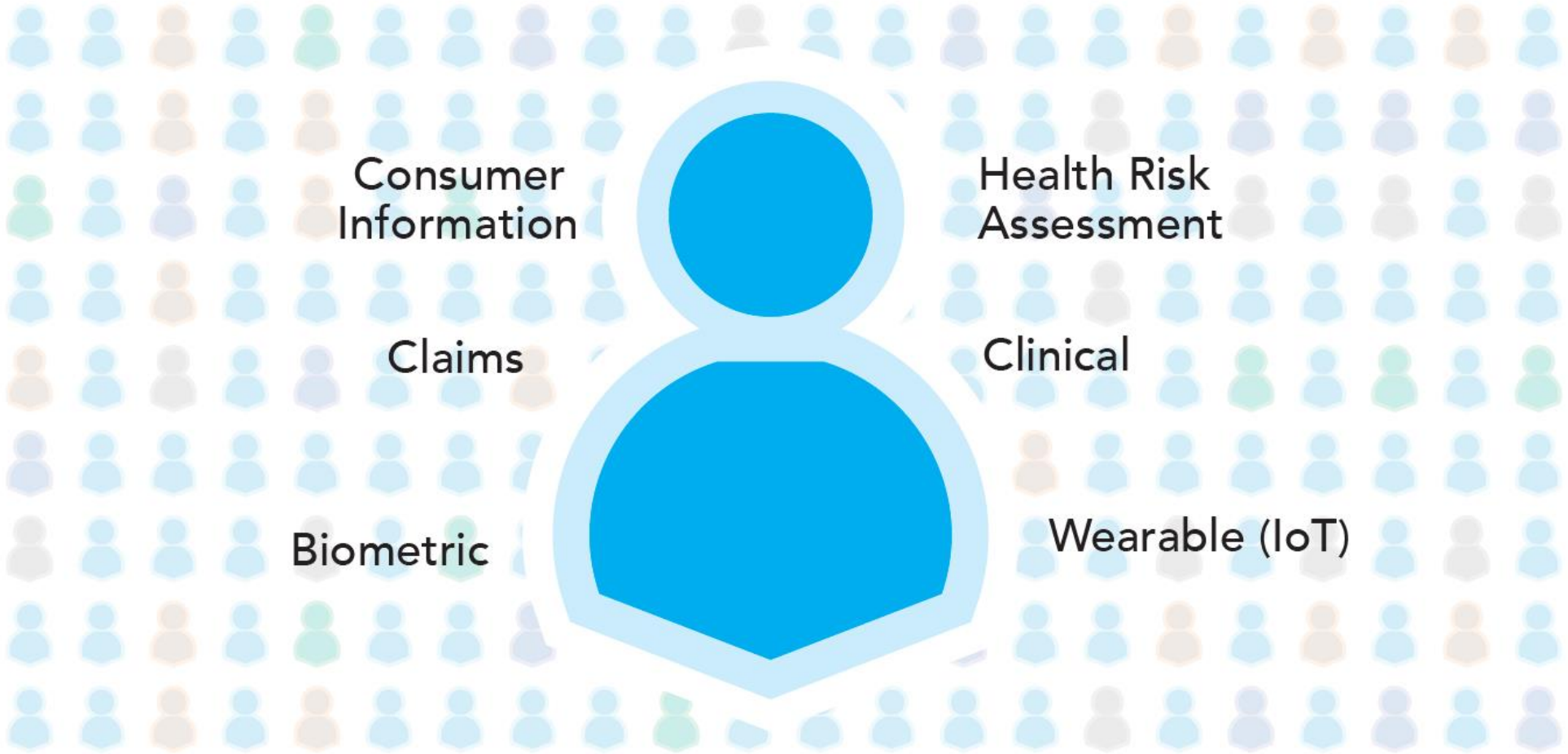
January 2017

Reach the Right Person, at the Right Time, in the Right Way



Guided Analytic Insights to Drive Health Consumer Engagement

Risk Stratification

Risk bearing contracts require an understanding of the individual healthcare consumer within a population

Predictive Insights

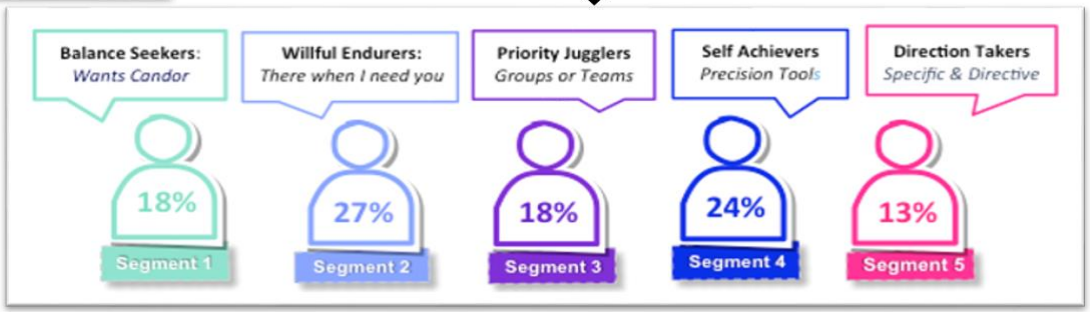
Proactive insights allow better management and prioritization of human capital and financial resources

Psychographic Segmentation

Prescriptive insights drive optimized results in cost, quality and satisfaction through personalized interventions

Analytics to Optimize Engagement and Activation

Leverage claims, biometric and HRA information to identify health improvement opportunities.



Utilize socioeconomic factors and psychographics segment the population into meaningful categories based on how an individual prefers to interact with the healthcare system. This allows your organization to tailor outreach to your customers and utilize valuable resources more efficiently and effectively.

WELLNESS EDUCATION & HEALTH REMINDERS

APPOINTMENT REMINDERS

MEDICATION ADHERENCE

SURVEYS & INSIGHTS GATHERING

Engage the **right person**, at the **right time**, in the **right way**.

Let's be Frank - Humanizing Analytics

In addition to Consumer Data, we have Frank's Claims Data, Health Risk Assessment and Biometric data, allowing us to have a frank conversation with Frank about his complete healthcare needs.

Age: 42 **Gender**: M

Marital Status: Divorced
Annual Income: $65,000
Demographics: Some College, Hispanic, Hard Working Renters Demographic Segment, 2 Children in the Household, Spanish Language Preferred, Active Social Media Accounts.
Psychographics: Balance Seeker. Needs to be given options for care to evaluate. Medical care must make sense with his lifestyle for him to be compliant. Will be most responsive to emails or text messages as a form of communication.
Predictive Insights: Likely to visit the Emergency Room, Likely to have above average medical services utilization in the coming year.
Biometrics: Consistently elevated BMI, Historic moderate to elevated Blood Pressure, Recently elevated Cholesterol levels.
Health Risk Assessment: Reported Smoker, High Nutrition Risk, Moderate Exercise Risk. Not reportedly ready for change at this time.
Confirmed Conditions: Pre-Diabetic, Cardiac Conditions (High Blood Pressure and CAD)
Health Risks: Engaged with a Cardiologist, but not an additional primary care provider. Over the last two years, has had average healthcare expenditures, and below average utilization.

We have a lot of information about Frank, and he has a lot of contributing factors to his current health status. Our understanding of these factors help us to engage Frank at the right time, in the right way, to keep him healthy.

Customer Success Stories

Success Story 1 Patient Centered Medical Neighborhood Program

- Served as the analytic solution for a multi-year Center for Medicare and Medicaid Innovation Program covering over 330,000 Medicare Beneficiaries. The program showed savings of approximately $50M per year in medical costs while maintaining or improving patient outcomes and satisfaction in 15 U.S. Markets.

Success Story 2 Health Consumer Movement

- Provided a consumer insight platform that allowed a health plan to maneuver through the transition to the Federal Exchange Market driven by the Affordable Care Act. The solution allowed the plan to make critical business model decisions and become the “trusted advisor” to their marketplace customers.

Success Story 3 Bundled Service Models

- Built complete longitudinal bundled rates for large employer groups to identify costs and potential savings opportunities. Included orthopedic and cardiac services for both inpatient and outpatient settings. Bundles encompassed device choice on long-term outcomes by leveraging remote monitoring data.

Customer Success Stories

Success Story 4 Patient Recruitment & Engagement - Psychographics

- Provided insights about local potential patient population to a Health System in order to increase visits at newly opened Primary Care Facilities. Providing meaningful segmentations and insights about the population facilitated initial visits as well as retention of patients.

Success Story 5 Small Group Retention

- Due to increasing competition, a regional health plan wanted to boost retention rates among their small group market. Our customized value segmentation coupled with predictive modeling allowed the plan to focus limited resources with a defined retention strategy.

Success Story 6 Heart and Stroke Patient Management

- A collaborative focused on management of heart and stroke patients identified patients with concurrent or prospective risk of heart and stroke related conditions. Additional analysis provided strategic insights into best care management initiatives for each patient.

Patient Centered Medical Neighborhood Program

TransforMED℠ TRANSFORMING MEDICAL PRACTICES

Letter From TransforMED Team

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We are truly excited to share with you some community results of the Collaborative Patient-Centered Medical Neighborhood (PCMN) Health Care Innovation Award (HCIA) supported by the Center for Medicare and Medicaid Innovation (CMMI). Without the dedicated work of countless practice coaches, administrators, physicians, nurses and office staff across each of the 15 participating communities, these results would not have been possible. They represent thousands of hours of hard work across each community and demonstrate that when a community comes together to improve their health care, they can make a tremendous impact. These results are not from a single practice or community, which might allow you to dismiss them as a local phenomenon—they are from 90 primary care practices allied with 15 health systems in 65 cities across the country.

Participating practices piloted TransforMED's approach to delivering better health, better health care and lower costs using the PCMN model. The PCMN concept connects patient-centered medical home (PCMH) primary care practices with other community-based health care providers to create a more efficient, coordinated health care delivery network that improves care at a lower cost. Communities and medical practices received NO ADDITIONAL COMPENSATION as part of the project, but instead received a broad dashboard of practice/community performance metrics around cost, quality and utilization, as well as dedicated support from practice coaches. Using this data to drive interventions, practice facilitators were able to combine traditional PCMH transformation, quality improvement methods and focused exploration/sharing of peer best practices.

The Results

MANAGED CARE DIGEST SERIES® SINCE 1987

Provided by
Sanofi U.S.
Bridgewater, NJ

Developed and produced by
Forte Information Resources LLC
Denver, CO
www.forteinformation.com

Data provided by
IMS Health
Parsippany, NJ

www.managedcaredigest.com

CONTACTS

Leveraging claims-based data consolidated and analyzed through our partnership with Cobalt Talon (Kansas City, MO), EMR-based data collected and aggregated by our partner Phytel (Dallas, TX), and best practices exploration and blueprinting by our partner VHA (Irving, TX), the practices, communities, and staff at TransforMED worked tirelessly over the life of the project to attain their stated year-three goals of:

- **Costs.** Reduce overall health care costs for Medicare and Medicaid beneficiaries by four percent, or $49.5 million, by 2015
- **Health.** Improve the health of the eligible population as demonstrated by an average of 15 percent—and at least three percent improvement—in each selected quality measure by 2015
- **Patient experience.** A 25 percent improvement in patient experience measures that reflect patient engagement, access and quality by 2015
- **Scalability.** Demonstrate the ability to scale additional practices within each community by 2015.

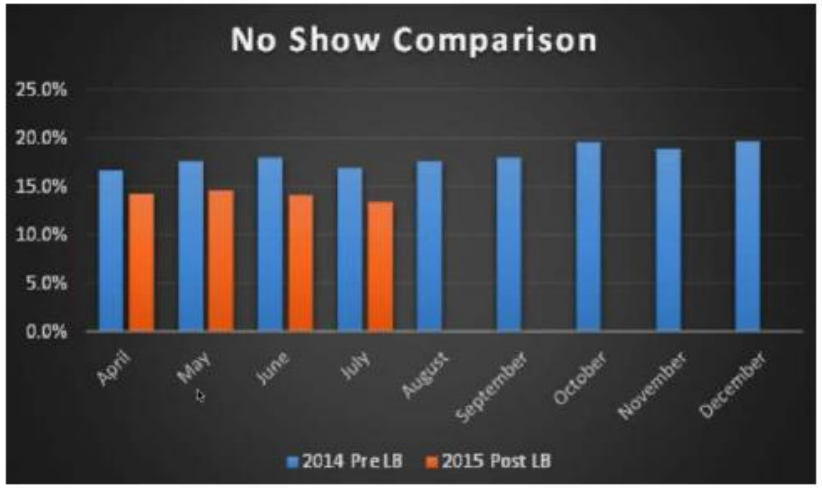
On behalf of the TransforMED team and the participating communities, we welcome you to share in our learnings and wish you the best in your future efforts to improve America's health care!

Psychographic Segmentation Success Stories

Reducing Missed Patient Appointments

RESULTS

Between April and June 2015, reduced missed appointments by 22%, driving the average missed appointment rate from 18% to 14%. This represents an **increase of over $70,000 in monthly revenue for the health system.**



This achieved nearly **800% Return on Investment** (ROI) for the health system relative to the costs of implementing PatientBond.

Through July 2015, patient response rates to all communications are up to 36%. Response rates to texts/SMS are highest at 40%, phone calls are 30% and emails are 15%. Note, the click-through rate for most marketing email campaigns is 1%, so a 15% email response rate offers a significant opportunity to embed promotional/brand messaging into reminder communications.

Consumer Insights Used to Grow Patient Traffic for a Medical Group

The Opportunity

A medical group in the Northeast was trying to improve patient satisfaction and increase its patient population in a competitive environment. The medical group's patient satisfaction survey indicated that patients were highly dissatisfied with the parking situation, so the medical group earmarked $1+ million to repave and expand its parking lot.

The Results

The Chief Operating Officer of the medical group provided an update on the results. He was excited to report:

- Patient satisfaction scores were consistently rising
- The medical group was seeing +1,000 new patients per month versus prior trend
- Public receptivity to the new advertising campaign was high

The medical group ended up repaving its parking lot as a "phase 2" effort in continuing to improve patient satisfaction scores, covering these costs with incremental revenues earned from its success.

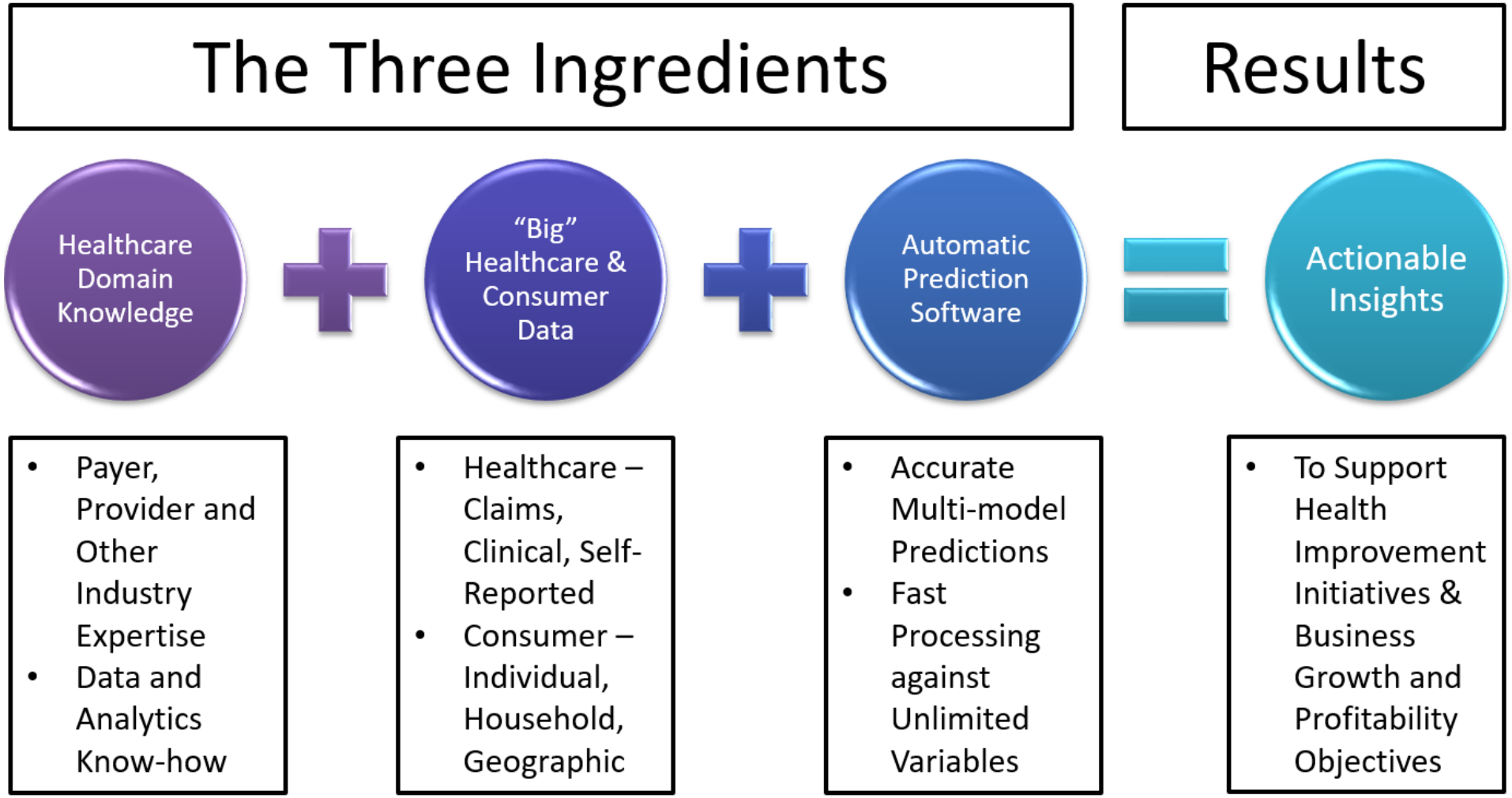
Leveraging a Healthcare Data Science Lab

- Key Ingredients to Create New and Impactful Insights to Necessary to Managing Risk →
- In Support of Discovery Analytics, Predictive Analytics, Segmentation Analysis and Other Data Studies

Data + Human Expertize + Technology

Detailed Medical & Pharmacy Claims and Clinical Data Spanning Multiple Years of History	Socio-Economic & Psychographic Consumer Data Elements Across the United States	•Seasoned Healthcare Subject Matter Experts & Advanced Data Science Technologies •

Propensity Modeling Process



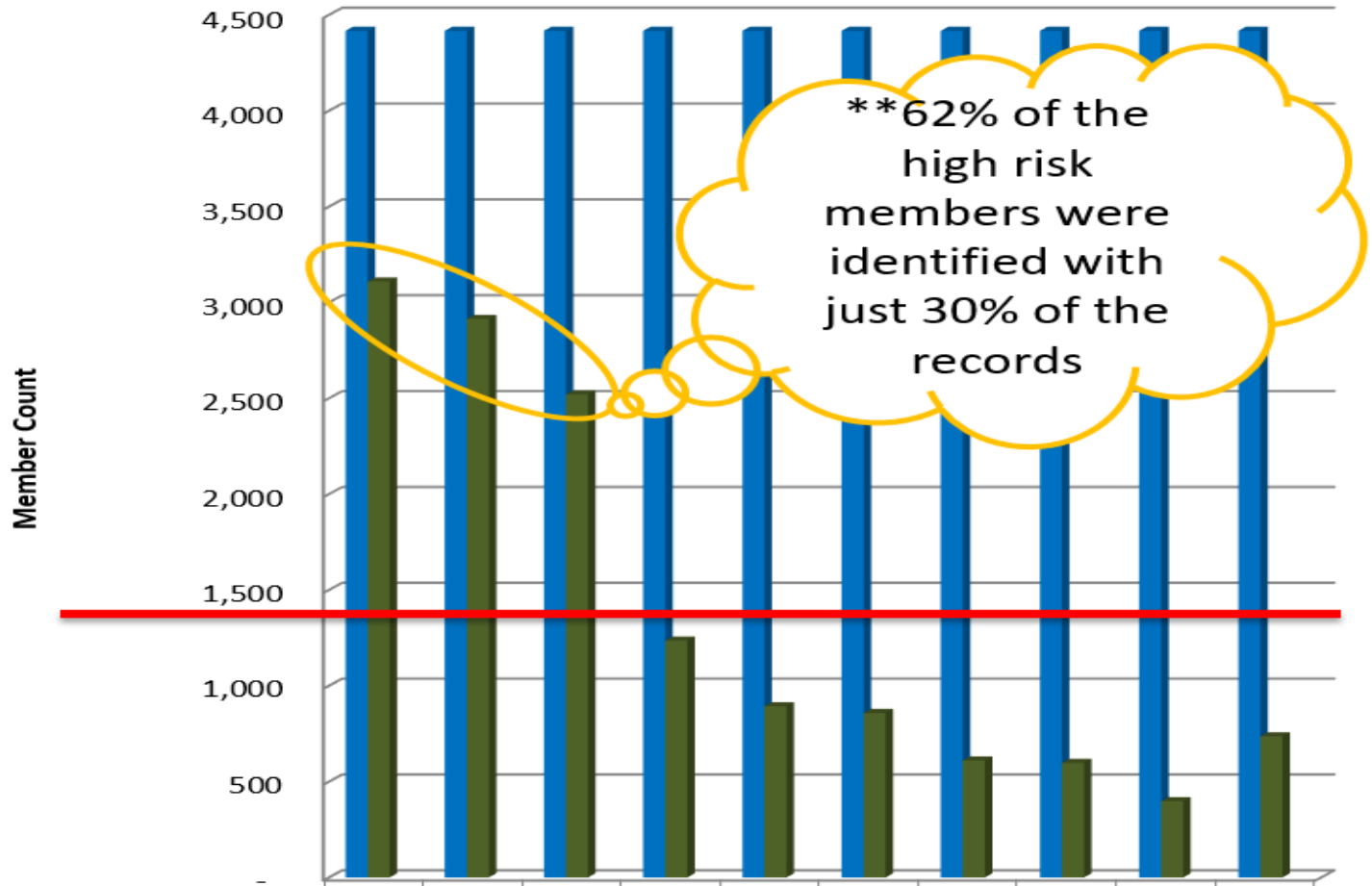
Use Case: Predicting High Risk Members Without Claims Data

Can consumer data help predict healthcare risk?

- Training File – A "known" population falling above and below the 75th percentile of health risk
- Prediction File – 200 consumer data points (e.g., household size, household income, location, education, etc.)
- Result File – Likelihood of an "unknown" member to be above the 75th percentile of health risk

Results

- The Random Average was a 31% chance of being high risk (>75th)
- Propensity scores in the top three highest deciles identified 62% of the high risk members**
- The top three highest propensity deciles had an average score of 65%...34 points greater than the Random Average



	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th
Total in Decile	4,417	4,417	4,417	4,417	4,417	4,417	4,417	4,417	4,417	4,417
Targets Identified	3,109	2,914	2,520	1,236	893	858	610	598	398	736
Random Average	1,374	1,374	1,374	1,374	1,374	1,374	1,374	1,374	1,374	1,374

Use Case: Small Employer Group Churn/Retention Analytic

2014 Renewal Opportunities – Propensity to Cancel							
Propensity Grouping	Total Renewal Opportunities	Percent of Total	Actual Cancels	Percent of Total	Random	Percent Actual Cancels	Lift (X to 1)
High	809	10.4%	446	49.2%	11.65%	55.13%	4.7
Mod	809	10.4%	94	10.4%	11.65%	11.62%	1.0
Low	4,146	53.2%	278	30.7%	11.65%	6.71%	0.6
Very Low	1,480	19.0%	70	7.7%	11.65%	4.73%	0.4
No Results	543	7.0%	19	2.1%	11.65%	3.50%	0.3
Total	7,787	100.0%	907	100.0%	11.65%	11.65%	1.0

EXAMPLE

Focus Time and Attention on 14% of the Groups - High Value/Likely to Cancel

Value Segment	No Result	Very Low	Low	Moderate	High
High	302	601	441	49	16
Mid	214	576	2366	479	526
Less	20	180	398	33	40
Low	6	123	938	116	225
Null	1	0	3	132	2

Propensity to Cancel Band

Actions: Customized Renewal Approach for Each Value/Propensity Segment (e.g., personal phone call to Mid/High Value & Moderate/High Propensity.

Results: Cancelation Rates for Mid/High Value Segment reduced by ~50%.

Q & A