



**Greater Philadelphia
Business Coalition
On Health**

"Building Bridges to Better Healthcare"

2019 Diabetes Management Resource Guide

Diabetes is prevalent and costly, and improving diabetes management is a priority for most employers. A wide range of service vendors and other resources are available to assist employers. The Greater Philadelphia Business Coalition has developed this resource guide in order to help employers sort through a crowded field.

Through internet search and input from the Employee Health and Well-being Interest Group, GPBCH identified service vendors and other organizations that currently offer tools, information, and management programs to help employers in their diabetes management efforts.

GPBCH requested the following information from these organizations:

1. Name of the Organization
2. Description of diabetes-related services
3. Experience to date
4. Pricing of services
5. Website(s) for additional information
6. Contact name, title, corporate address, phone number, and e-mail to request additional information

Not all invitees chose to respond to the request for information. In addition, there are undoubtedly other organizations that were not identified or for whom a contact could not be identified, that offer information and services of value. We also focused the solicitation on organizations that have a specific diabetes-related product, so some general population health management, case management, and health coaching services were not included in this report. So, this is not a comprehensive listing of all vendors, but rather those sources of information and support that were identified as most relevant and of greatest interest to employers at this time.

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Health Advocate

Health Advocate offers a holistic approach to a member's health and wellness needs, offering a fully integrated disease management program alongside of our other health and wellness solutions, allowing for greater case collaboration, engagement and a more positive member experience. Our program is designed with a specific focus on nine primary conditions that typically account for up to 80 percent of medical costs: Diabetes, Hypertension, Heart Disease, Asthma, COPD, Depression, Heart Failure Chronic Kidney Disease and Metabolic Syndrome. Additionally, we offer a concentration on the highest risk, highest cost members and those with serious, life altering conditions who don't necessarily fit into one of these specific programs.

Members can self-identify for our programs at any time, however, most candidates are identified using our predictive analytics, which takes advantage of our proprietary clinical algorithms and prospective risk and comorbidity assessment tools to identify and risk stratify members with chronic medical conditions. Our biometric screening program offers an additional means of identifying candidates. We construct a longitudinal record for each member using information from our interactions as well as medical and pharmacy claims data, information from a health risk assessment, and biometric screening and laboratory testing results. Once identified, we attempt to proactively engage members in our evidence-based, multidisciplinary education, coaching and self-management program.

Our diabetes program is designed for those with diabetes as well as those at risk. As a Diabetes Prevention Program, the initiative follows current CDC guidelines and is modeled to achieve certification as a DPP program.

As part of this comprehensive approach, members with diabetes and pre-diabetes are connected with one of our Certified Diabetes Educators or Nurse Coaches and enrolled in a curriculum of diabetic education that focuses on understanding this disease, preventing progression or reversing risk, self-management and self-monitoring techniques. The program addresses health and lifestyle behaviors in accordance with ADA guidelines. Members receive tips on recognizing signs of trouble so that they can attend to their condition more effectively. Our team will also help them obtain their medications and schedule appointments for needed preventive care. Telephonic coaching appointments are scheduled at approximately bi-weekly intervals at the convenience of the member. Members can interact with their coach online and on our mobile App. The program continues until the member and coach agree that the desired goals have been met, however members can return to the program at any time for a "tune-up." Our ultimate goal is to connect a better informed member with a trusted physician for ongoing care.

Experience to Date: Health Advocate's chronic condition solution, which includes our diabetes and prediabetes program is currently provided to 174 employer groups covering more than 500k employees. Health Advocate measures outcomes by comparing clinical measures within the population that has engaged with Health Advocate to the group that did not engage with us, recognizing that even those who did not engage may have nevertheless received targeted outbound messaging that stimulated them to take actions. While individual experience varies across these employers, the typical client will see a significant (5% to 25%) improvement in compliance with recommended diabetic care, better medication adherence, and reduced costs associated with diabetes resulting from fewer and shorter hospital admissions and lower levels of emergency room use. Aggregated across all of our clinical care programs, among 26,024 members who received outreach because of an existing Gap-In-Care or other medical condition need, 45% engaged with Health Advocate, leading to a 7.6% decrease in medical costs year over year. Among the 100 highest cost members, there was a 10.3% decrease in costs year over year.

Pricing of services: Our Chronic Care Solutions program is priced on a PEPM basis. The program is presented as a "whole," encompassing all of the conditions we focus on, however, individual programs addressing single condition can be offered. Pricing varies with the size of the client and the number of conditions covered.

Website(s) for additional information: www.healthadvocate.com

Contact information:

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Livongo

Livongo is the first company at the intersection of data science, behavior enablement, and clinical impact with the technologies and capabilities to Silence Noisy Healthcare.™

Livongo, the leading Applied Health Signals company, empowers people with chronic conditions to live better and healthier lives. Livongo's team of data scientists aggregate and interpret substantial amounts of health data and information to create actionable, personalized, and timely insights and nudges delivered to our members to help them stay healthier. Our approach is leading to better clinical and financial outcomes while creating a better experience for people with chronic conditions that include diabetes, prediabetes, hypertension, weight management, and behavioral health.

Our personalized approach provides members with the right information and support at the right time that leads to behavior change.

Livongo's cellularly-connected Blood Glucometer:

- Allows frequent upgrades and enhancements 'over the air'
- Eliminates daily logbooks; captures more test information
- Simplifies 2-way information sharing between your people, our clinicians
- Eliminates the need for a cell phone and the hassles of Bluetooth connectivity

Cloud-based Analytics:

- Deliver personalized experiences for each member
- Deliver personalized and actionable suggestions in real time
- Outreach to friends and family immediately during low/high blood sugar events

Diabetes Experts Available 24/7/365:

- Deliver unlimited 1:1 personal coaching, 24/7/365
- Are seasoned, highly-educated Certified Diabetes Educators
- Proactively reach out to members during low/high blood sugar events

Unlimited Testing Supplies:

- Promotes frequent testing
- Eliminates out-of-pocket cost for your people
- Eliminates your current cost for testing supplies (~\$25 PPM)
- Automates supplies reordering based on usage

Experience to Date: Livongo's leadership team is comprised of executives with proven experience at well-known healthcare organizations including Allscripts, Cerner, Castlight, Cigna, GE Healthcare, 23andMe, the American Diabetes Association and Sanofi. Livongo leads the way in defining the future of healthcare and technology with the addition of executives from the technology industry including Apple, Google, Intel, Oracle, Tesla, Twitter and Evernote. They have 650+ clients, with a 95% retention rate, who represent 25% of Fortune 500 companies and over 20 industries. They also partner with 15 of the largest health plans and the top two pharmacy benefit managers.

Proven Impact: Satisfaction Net Promoter Score of +66, 0.8 HbA1a with 15% reduction in hypoglycemia, 9mmHG systolic blood pressure reduction, 7.3% weight loss, 74% depression improvement, and demonstrated financial results of \$108 PPM cost savings.

Pricing of services: Livongo's solutions for Diabetes Management, Hypertension, and Weight Management/Diabetes Prevention are all priced on a \$PPM basis.

Website(s) for additional information: www.Livongo.com

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Merck

Merck has put together several resources with the purpose of educating readers on the overall effects which diabetes has on your health and body as well as the steps you can take to manage this disease. Click the links below to access the documents:

Diabetes and What You Need to Know - https://www.gpbch.org/docs/merck_what_you_need_to_know.pdf

How Diabetes Affects the Body - https://www.gpbch.org/docs/merck_how_diabetes_affects_the_body.pdf

The Diabetes Portion Plates - https://www.gpbch.org/docs/merck_portion_plates.pdf

To learn more on what Merck is doing in the Diabetes space visit: <https://www.merck.com/about/our-work/diabetes.html>.

Naturally Slim

We often are asked if Naturally Slim is a program that someone with type 2 diabetes can go through. And the answer is absolutely. The principles of Naturally Slim are the exact things you want someone with diabetes to do – reduce some weight, become physically active, and limit the amount of refined carbohydrates and sugars they are eating. Because of this, those with diabetes frequently join our weight loss, metabolic syndrome reversal program to support their treatment plan.

Naturally Slim is a common-sense, digital counseling program for building healthy habits to help participants lose weight, improve their health and boost their overall quality of life. By learning simple skills to change when and how to eat, instead of what to eat, participants don't have to give up the foods they love. Plus, Naturally Slim creates other healthy habits leading to increased physical activity, better sleep, less stress and participants feeling more in control over their health long-term.

Naturally Slim is different than any other weight loss or behavioral counseling program because our curriculum is the only one founded on Eatology™, the study of when, why and how we eat. Before participants can learn about nutrition, physical activity and the numerous other topics important to their overall health and recommended by the USPSTF, they need to understand and possibly redevelop their relationship with food.

Experience to Date: For over 10 years, we have worked with close to 1000 companies in just about every industry throughout the country to help their employees improve their health and reduce their risk for weight related conditions.

The results of the Naturally Slim program have been published in multiple peer-reviewed clinical studies showing:

- 50.7% of participants reversed their Metabolic Syndrome
- 55% reduction of type 2 diabetes risk
- 50% reduction in hypertension prevalence

As important, our clients that have been offering Naturally Slim for up to 8 years are showing that these results are replicated in the “real world” as they report similar outcomes at both the prevalence level as well as closed cohort level.

Pricing of Services: Naturally Slim is the single most cost-effective way for employers and plan sponsors to do the most good for the most employees/members. With no upfront fees and clinical outcomes for a fraction of the cost charged by other providers, the Naturally Slim program can easily be rolled out to an unlimited number of participants regardless of their geographic location or concentration.

We do not charge any kind of set-up fee, marketing fee, or welcome kit fee. We also do not charge on a per employee per month basis but rather based on the performance of the program. If your employees don't use the program, you don't pay for it. Additionally, we offer a 100% clinical guarantee. Fees can be submitted to many/most carriers and TPA's and processed as preventive care medical claims as part of a self-funded program.

Website(s) for additional information: <https://www.naturallyslim.com/home>

Contact information:

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Newtopia

Newtopia is a precision health company focused on sustainable habit change to prevent chronic disease. Newtopia's approach leverages the best of technology and the best of human interaction to deliver a proven habit change coaching program. Individuals eligible for the program are those considered to be at-risk of developing preventable chronic disease like type 2 diabetes, heart disease, stroke or NASH. While we do not specifically focus on condition management, we have participants who have type 2 diabetes on our program. Our intervention helps participants with type 2 diabetes make the necessary lifestyle changes to improve their condition as it relates to their nutrition, exercise, and behavioral well-being.

Technology helps us attain the level of personalization required to deliver an effective habit change solution. We use a genetic test, personality questionnaire, and personal profile to understand each of our participants genetically, socially, and behaviorally. We coach participants virtually using video, phone, text and/or email. Participants can be anywhere at any time to connect with their personal coach. We also use various tracking tools to continuously measure a participant's weight and activity. All their goals, progress, and educational resources are housed in their Newtopia Achieve on the Go app.

Our secret sauce and the high-touch/human element of our program are our Inspirators (coaches). Our Inspirators' goal is to inspire participants to live healthier every day in order to become their best self. To ensure compatibility between Inspirators and participants, we use a proprietary algorithm to ensure a personality match. Armed with social, lifestyle, genetic, and behavior information about each participant, Inspirators can deliver and inspire participants to achieve their nutrition, activity, and behavioral well-being goals. Every one of us is unique, so each participant's program experience is unique. Recommendations and goals assigned are specific to everyone's lifestyle, likes, and dislikes. Changing one's habits is required for sustainable lifestyle improvements but is not an easy thing for people to do. With the help of a personal coach and the right digital tools to supercharge that relationship, we have the solution to make it happen.

Experience to Date: The results of our Aetna-sponsored RCT were published in the Journal of Occupational and Environmental Medicine (https://journals.lww.com/joem/Fulltext/2015/12000/Reducing_Metabolic_Syndrome_Risk_Using_a.3.aspx). Newtopia proved that not only did participants lose weight and experience meaningful clinical improvements, there was an in-year cost savings of \$1,464 per employee per year. These savings are equivalent to a 2X return on investment in the first 12 months of the Newtopia program. We have seen these results double at 24 months and continue to grow at 36 months. The same outcomes seen in participants in the RCT have been replicated in our commercial customers. We have over 10,000 participants in the program representing over 250,000 at risk lives under contract. We are on track to grow to over 500,000 lives under contract in 2020.

Pricing of Services: Pricing structure is engagement and outcomes based. There are no implementation costs or Per Employee per Month fees. Fees are at the participant level. In addition to the monthly fees, there is an initial cost for a Welcome Kit which includes a cellular scale, activity tracker, genetic test, and additional information about the program.

Website(s) for additional information: www.Newtopia.com

Contact information:

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For more information, please reach out to marketing@newtopia.com

Novo Nordisk

[Cornerstones4Care](#) is a support program that provides the information, tools, and resources you need to help manage your diabetes. Membership is FREE. And if you'd like to become a member, you may receive benefits like calls from a diabetes educator and educational emails. Check out the free resources below to learn more:

- Cornerstones4Care – [Diabetes Medicines Booklet](#). The purpose of this booklet is to help you learn about the different types of medicines for treating diabetes. Be sure to discuss your personal diabetes care needs with your diabetes care team.

https://www.cornerstones4care.com/content/dam/nni/cornerstones4care/pdf/content/medicine/Diabetes_Medicines.pdf

- Cornerstones4Care – [Glooko App](#). A Free diabetes management app that can track your blood sugar, activity, and meals all in one place. <https://www.glooko.com/landing/c4c/>

- Diabetes Education Program – [Planning Healthy Meals](#). A visual guide to help with the fundamentals of planning healthy meals, including information on food labels and portions, and helpful food lists for making healthy choices when creating a balanced meal.

https://www.novomedlink.com/content/dam/novonordisk/novomedlink/resources/generaldocuments/Planning_Healthy_Meals.pdf

Website(s) for additional information: <https://www.cornerstones4care.com/>

One Drop

One Drop is a leader in healthy lifestyle and condition management programs that deliver improved health outcomes for program participants and lower the cost of care for employers. One Drop's unique approach combines clinically proven coaching, smart devices and AI-powered mobile tools that simplify self-care and make healthy living attainable. One Drop's program covers pre-diabetes, diabetes, hypertension and high cholesterol and includes digital tools for medication adherence, food logging, physical activity monitoring and biometric monitoring of health markers (e.g. blood glucose).

Each participant who enrolls in the program receives a One Drop starter kit with connected devices, a personalized educational curriculum, unlimited one-on-one access to a certified health coach and unlimited diabetes testing supplies shipped directly to a participant's home. One Drop's digital diabetes education and support program was the first ever recognized by the American Diabetes Association, with clinical results published in over 15 peer-reviewed journals and presentations. One Drop is also the first and only company to deliver accurate predictions of a participant's future glucose levels using machine learnings and advanced AI. Click on [One Drop AI](#) to learn how One Drop is delivering actionable health insights to help improve self-care behaviors for people living with diabetes (https://onedrop.today/blogs/blog/decision-support-one-drop-can-predict-the-future-with-automated-decision-support?utm_source=One+Drop+Users&utm_campaign=6f28b3bbac-EMAIL_CAMPAIGN_5_30_2019_COPY_01&utm_medium=email&utm_term=0_0cb802a1db-6f28b3bbac-63423769&mc_cid=6f28b3bbac&mc_eid=da2372a654).

Experience to Date: One Drop has been in market since 2015 and its multinational diabetes program is currently available in 30 countries with support for 10 languages. One Drop has tens of thousands of self-pay consumers enrolled in Experts coaching and over 1.1M registered users on One Drop's mobile app available for free download in 195 countries. One Drop also has commercial relationships with several respected healthcare, retail and technology companies including Apple, Amazon, Best Buy, Dexcom, Fitbit, Mannkind, Sanofi, Walmart and others. One Drop's diabetes program has consistently delivered clinical outcomes across multiple participant groups (Type 1 and Type 2 diabetes, insulin and oral medications) and results have been published in multiple peer-reviewed journals. In most studies One Drop achieved at least a 1% reduction in A1c with the most significant outcomes resulting in a 1.9% reduction in A1c. References to One Drop's peer-reviewed outcomes can be found at <https://onedrop.today/pages/clinical-results>.

Pricing of Services: One Drop's program pricing model is based on a per enrolled participant per month fee. Monthly program fees include the cost of the starter kit with a single connected device (blood glucose monitor, weight scale or blood pressure cuff), unlimited testing supplies for diabetes and unlimited one-on-one access to a certified health coach. There are no setup fees and the monthly flat fee includes One Drop enrollment marketing and monthly reporting of participant engagement and clinical metrics. Compared to its peer-group, One Drop offers one of the most accessible and affordable programs available in the market.

Website(s) for additional information: <https://onedrop.today/>

Contact information:

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Corporate Office Address:
One Drop
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New York, NY 10012

Optum

Real Appeal, a virtual weight-loss coaching program, is an engaging solution to an employer's entire population. Our solution balances clinically proven science with personal motivation delivered through web and mobile environments to deliver sustainable lifestyle changes at scale. Real Appeal is an intensive lifestyle intervention program based on decades of clinically proven research in behavior change and prevention of chronic diseases like Type 2 diabetes, cardiovascular disease, musculoskeletal disorders, cancer and high blood pressure, with a focus on nutrition and exercise.

Our content is validated by scientific research and based on the foundation of an Intensive Lifestyle Intervention – small steps that lead to sustainable results over time. We combine information gleaned from years of research with a relatable coaching model that keeps members entertained and engaged. Real Appeal engages participants in weight-loss coaching through a fun and interactive format. Our solution is designed to keep members accountable and empower them with the skills to take action toward their weight-loss goals. Our methods transcend traditional barriers to consistent participation as all coaching is conducted live over the Internet during days and times that participants select, we can scale to meet your members in a convenient and flexible way.

Experience to Date: Our approach has yielded the following impressive results:

- 620K+ registered participants to date with 15-20 percent average client engagement
- 2M+ pounds lost to date
- 80 percent of participants have lost weight
- 10 pounds lost on average; 42 percent of those who attend four or more sessions lose 5 percent or more
- Participants who attend at least four coaching sessions incur medical costs \$254 lower than non-participants, representing six percent cost savings
- Participants who attend at least 26 sessions see their cost savings grow to \$674, or 16 percent cost savings.

Pricing of Services: Our unique pay-for-performance pricing structure minimizes the cost risks that come with other solutions. Fees begin when the participant registers and completes the registration session; fees are only billed when the participant engages in weekly group sessions and is on track for a five percent weight loss. Weekly group sessions are billed to a maximum of 12 sessions. These fees can be billed and paid through medical claims as preventative care or invoiced directly to and paid directly by the employer.

Website(s) for additional information: <https://realappeal.com/>

Contact information:

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Pack Health

Pack Health is a digital health coaching company that enables people who have one or more chronic conditions to access the right care and develop the self-management skills to improve key health outcomes that affect employers' bottom line.

Pack Health engages participants with weekly lessons, coaching calls, and personalized follow-up including: reminders and encouragement, informational videos, resource recommendations, personalized action plans, and care coordination services. Follow-up is delivered via text and email, according to the member's communication preferences. Members opt-in to work one-on-one with a Health Advisor, online and over the phone, to overcome barriers, address social determinants of health and achieve personal health goals.

Health Advisors act as a coach and concierge, using simple, evidence-based content and resources to help members learn, engage, and be accountable to their health. Over the first 12 weeks of engagement, an average of 170 touchpoints occur per member.

Pack Health offers programs for 25+ chronic conditions and several technical integration points. We easily share information with incentive vendors, create employer-specific cross-referrals, and direct members to other features of your wellness program or specific care partners. Pack Health also integrates with a range of wearable and smart devices, allowing members to connect their fitness tracker, glucometer or scale to our platform or app to maximize their coaching experience. All participant data is stored in our cloud based workflow engine which allows for reliability, scalability and rapid reporting.

Experience to Date: Pack Health has partnered with dozens of employer groups, IDNs, insurers and pharmaceutical companies to engage over 11,000 patients, across 25+ condition-specific programs, in all 50 states.

Typical Type 2 Diabetes Results:

- 1.2% HbA1c reduction, from 8.2% to 7.4%
- 21% increase in medication adherence
- An average of \$196 in savings per member per month
- Weight loss of 3% for males and 2.4% for females
- Content satisfaction rate of 96%

Pricing of Services: Pack Health charges a PEPM or PMPM to employers, depending on the needs of the individual company and diseases covered. For Type 2 Diabetes (T2D), we would envision a PEPM model. Beginning January 1, 2020, Pack Health can be paid through health plan claims integration. Employers can choose one condition, a combination of conditions driving prevalence and cost, or all 25+ conditions offered.

Website(s) for additional information: <https://packhealth.com/>

Contact information:

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Roche Diabetes Health Connection

Roche Diabetes has been pioneering innovative diabetes technologies and services for more than 40 years. Under the Accu-Chek and mySugr brands, and in collaboration with partners, Roche Diabetes continues to lead in the area of both mobile applications and blood glucose monitoring. The integrated ecosystem today gathers insights from over 1.5 million users. These insights, combined with the near real-time data gathered through widely used diabetes related devices, enables personal and professional monitoring of glucose levels remotely and informs the mySugr certified diabetes educators to deliver timely feedback and interventions. Below, you'll find an overview of the solution and its capabilities.

Patient Engagement:

- mySugr app syncs blood glucose Measurements
- eHbA1c calculations
- Available in 13 languages
- Intuitive results tracking and analysis
- Download and share reports with care management team

Device Integration:

- Fully Integrated with Accu-Chek portfolio
- Seamless integration with the most popular diabetes devices
- Consumption-based tracking
- Convenient home supply delivery and replenishment

Population Health Management:

- Analysis and risk stratification based on predefined clinical thresholds
- Aggregated data from an entire population enables risk-based intervention
- Portal for providing insights on therapy performance

Personalized Coaching:

- Goal-based coaching with certified diabetes educators
- Personalized educational content
- Risk-based proactive engagement
- Unlimited on-demand coaching

With the combination of the four pillars above, Roche Diabetes offers this unique integrated and customizable diabetes management solution as a service designed to provide the support needed to empower populations living with diabetes to achieve better glucose control through improved diabetes self-management.

Experience to Date: To date, the Roche Diabetes Health Connection program has been utilized by a variety of customer types, including Employers, Health Plans and Health Systems. The latest program offering includes the mySugr application as the engagement interface that allows the individual living with diabetes the opportunity to interact with their own data and coach. When a clinical study was performed, the program showed statistically significant improvements across the glucose control measures with very high ratings in overall program satisfaction.

- Significant Impact on Blood Glucose Control: eHbA1c down 1.3%
- High Net Promoter Score: +70
- Average App Store Rating: 4.6-star

Pricing of Services: The Roche Diabetes Health Connection program is designed to be customized to the needs of the employers and employees of the organizations we serve. Possible pricing determinants include the inclusion of unlimited testing supplies for participants, integration with additional devices to track health metrics and a number of other personalized customizations. Depending on these factors, program pricing can range from **\$35 to \$105 per member per month (PMPM)**.

Website(s) for additional information: <https://www.rochediabetescareme.com/en/data-management/connect>
<https://vimeo.com/231831074>
<https://www.youtube.com/watch?v=s9W9W9Zn54k&feature=youtu.be>
<https://www.accu-chek.com/>
<https://mysugr.com/>

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Sweetch

Sweetch is a clinically validated mobile-health platform that utilizes Artificial Intelligence to significantly improve diabetes management and outcomes. Sweetch's AI-powered Behavioral Intelligence Engine converts data collected from a patient's smartphone and other connected devices into contextual, hyper-personalized, just-in-time just-in-place, recommendations.

By analyzing the patient's current context and past behaviors, Sweetch dynamically optimizes the messages presented to the patient through identifying his/her high compliance patterns. This results in recommendations that truly fit the individual's daily life and real-world capabilities which lead to significantly increased likelihood of action and ultimately improved outcomes. Sweetch's proprietary Machine Learning algorithm enables the quantification of an individual's risk of developing diabetes complications. For employers, Sweetch allows prioritization of those with the highest risk of developing diabetes complications, hence improving resource allocation. From the patient's perspective – knowing one's quantified risk increases awareness, makes the risk more tangible, and serves as a strong driver for behavioral change.

To maximize its efficacy, Sweetch integrates robust behavioral science approaches alongside persuasive technologies inspired by mobile gaming, social empowerment, and gamification worlds. In a [clinical trial](#) conducted by Johns Hopkins, Sweetch achieved 86% engagement rate and clinically significant effect on weight loss, physical activity increase, and Hemoglobin A1C reduction (<https://www.ncbi.nlm.nih.gov/pubmed/29487046>).

Sweetch's recommendations target sustainable health promotion and disease management optimization through increasing physical activity, promoting weight loss, improving diet & nutrition, improving adherence to glucose measurement, improving medication adherence, improving follow-up adherence, and improving patient empowerment through interactive educational materials. Sweetch is a hyper-personalized patient interaction management platform relevant to different disease domains and use-cases – promoting health in healthy people, preventing chronic disease in at-risk people and improving clinical outcomes in those with established chronic diseases. Sweetch is currently being deployed in three disease verticals – Cardiovascular and Metabolic, Oncology and Autoimmune diseases.

Scalability – Sweetch AI-powered solution is a game-changer because it succeeds in bringing unprecedented personalization together with high-end scalability, efficiency, and cost-effectiveness.

Experience to Date: Global Traction – Sweetch's corporate clients span across U.S., EU, and APAC and include payers, providers, self-insured employers, pharma and medical device companies in different disease domains.

Pricing of Services: Subscription-based pricing: \$10 per-patient-per-month. Outcomes-based pricing: no outcomes - no incomes

Website(s) for additional information: <https://sweetch.com/>

Contact information:

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Tria Health

Tria Health offers Chronic Condition Management Solutions to improve the health of members of self-insured employers, which reduces overall health care costs. Tria Health's Program is different from other disease management programs because Tria Health utilizes pharmacists for confidential one-on-one telephonic consultations. The Tria Health pharmacist focuses on the entire patient and not one disease state. This is important since most high-cost, high-risk patients have co-morbidities. Since chronic conditions are typically managed with medication(s), having a pharmacist as a health coach is critical to ensure the patient is achieving the intended outcomes from their drug therapies. In addition, pharmacists are highly effective at coordinating care with physicians.

Tria utilizes pharmacy, medical and biometric claims data to identify high-risk members. Then, Tria outreaches directly to these members via a multitude of communication channels (phone, email, mail, text) with the ability to customize marketing and incentive plans to meet the needs of individual clients working within their benefit plan design and company culture. Then, a patient will have a confidential one-on-one consultation with a pharmacist. A patients' designated pharmacist will consult with them to make sure their medications are safe, affordable and effective. The pharmacist creates a customized care plan that includes a comprehensive review their health, medications, lifestyle, diet and exercise, and preventative care services.

In addition, the Tria pharmacist takes responsibility for coordinating any medication recommendations with the patients' physician and their pharmacy making it easy as possible for the member. After each consultation, a personalized care plan is sent to the member and their primary care provider. This Care Plan is also available on-line and can be used at future doctor appointments. The number of consultations a member has depends on how well they are managing their health, but a typical patient will have at least two consultations per year. All information is tracked within Tria Health's proprietary software system to provide comprehensive reporting on health outcomes and financial savings. Tria Health's program started with Diabetes ten years ago and due to its overwhelming success has expanded to include a multitude of other chronic and specialty conditions.

Experience to Date: Tria Health has approximately 200 clients managing over 500,000 lives. Tria Health recommends a minimum of 500 employees to ensure the best results. On average, Tria Health identifies approximately 20% of members and are able to engage between 25-30% of those members into the program. Outcomes are monitored and measured utilizing HEDIS® measures for the individual condition. In addition, Tria Health measures compliance and drug therapy problems, along with financial savings. On average, Tria Health save \$2,234 per engaged member. Tria Health will conduct a free claims analysis using six months of pharmacy claims to provide an estimated annual savings for clients prior to engaging with Tria Health.

Pricing of Services:

	Monthly Rates:
• 1-499 persons	\$5 PEPM
• 500 or more persons	\$4 PEPM
• Other	Tiered pricing is also available for larger group

Website(s) for additional information: www.triahealth.com

Contact information:

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Overland Park, KS 66210

Virta Health

Virta Health delivers the first treatment to safely and sustainably reverse type 2 diabetes in a way that can scale to alter the trajectory of the diabetes epidemic. To do so, Virta has pioneered two innovations. The first is a proprietary, individualized medical nutrition therapy, based on decades of research on carbohydrate restriction that helps people living with T2D restore metabolic health while removing the need for medications. The second is a reinvented care model that gives patients 24/7, near real-time access to a clinical team comprised of physicians and health coaches. Going far beyond telemedicine practices, this model gives patients medical care whenever and wherever they need it. It ensures that de-prescription of medications—which typically occur quickly because of the effectiveness of Virta’s nutrition therapy—happens safely and sustainably, and at the moment of need.

To accomplish the challenging goals of reversing diabetes and maintaining a patient’s metabolic health in a sub-diabetic state, Virta brings a wide variety of services to bear, with 5 primary dimensions worth highlighting in this request:

1. Physician-led care teams assigned to individual patients, with physicians responsible for overall patient health including, but not limited to, management of each patient’s diabetic medications and a highly trained health coach knowledgeable in individualized nutrition and sustained behavior change.
2. Evidence-based and broad patient guidance/curriculum/protocols, with a strong focus on nutrition science (and specifically, low-carbohydrate & high fat approaches) and behavioral science (to support effective patient decision-making).
3. Biomarker tracking including provision of a cellular-networked weight scale, and FDA-approved meter for tracking blood glucose and ketones.
4. Continuous remote care using Virta’s proprietary technology, including web-based applications for patient interaction, tracking, and learning.
5. Closed, curated patient peer-to-peer social networks to support community-building and peer assistance.

Experience to Date: Virta currently serves thousands of patients across a wide variety of employer populations. In Virta’s commercial population as well as ongoing peer-reviewed clinical trial, 60% of Virta patients enrolled at one year achieved sub-diabetic HbA1c levels while eliminating all diabetes-specific medications. 94% of patients reduce or eliminate the need for insulin, and nearly 90% of patients remain enrolled at one year. These transformational health outcomes drive significant savings. Patients taking insulin reduce medical spend by over \$4300 on average in year 1 alone.

While our focus at Virta is the reversal of type 2 diabetes, our clinical trial has proven that at one year we can also positively impact a number of other disease states including:

- Blood pressure (BP) - 4.8% decrease in systolic and 4.3% decrease in diastolic BP
- 12% average weight loss
- Reduction in inflammation - 39% decrease in high sensitivity C-reactive protein (hsCRP)
- Improvement in HDL cholesterol (HDL) - 18% increase
- Improvement in triglyceride - 24% decrease
- Improvement in non-alcoholic fatty liver disease (NAFLD) status including improved NAFLD liver fat score (N-LFS) and NAFLD fibrosis score (NFS)

Pricing of Services: Virta puts 100% of its fees at risk with the majority tied to health outcomes, which means payers can adopt Virta nearly risk-free for their population.

Website(s) for additional information: www.virtahealth.com
www.virtahealth.com/testimonials
www.virtahealth.com/research

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Welldoc

Welldoc's product, BlueStar, is a digital, self-management solution for people with diabetes that can provide insights to providers to accelerate best outcomes in diabetes care. BlueStar is the first FDA-cleared digital therapeutic for type 2 diabetes that has demonstrated clinically and economically validated outcomes. BlueStar lowers A1c for employees and, improves and reduces costs for employers. It is built to scale meaningful, tailored diabetes digital coaching across the entire population of individuals with diabetes.

The solution supports employees in between care visits, supports the existing care team (anyone the employee may be currently working with on their diabetes-care manager, CDE, PCP, etc.) with new insights about an individual's challenges and successes. The solution is comprised of three elements: 1) a digital app available to participants on their mobile device or browser; 2) clinical insights and decision support for the employee's provider via the SmartVisit report; and 3) population health analytics that provide insights about how the population is progressing.

The app itself allows a patient to enter multiple parameters – ranging from BG values, to meds or carbs consumed, to activity, sleep and symptoms – and receive personalized feedback on what to do, at that particular moment and longitudinally. BlueStar acts like a “coach in the pocket” of the patient and offers precise feedback for a series of entries that are customized and tailored to the individual's medication, medical history, co-morbid condition(s) and lifestyle profile. It provides real-time messaging intervention at the point of risk, where a patient may be experiencing a critical event, with specific guidance on addressing the issue as it is occurring.

BlueStar also powers LifeScan's One Touch Reveal Plus solution.

Experience to Date: Welldoc began selling to enterprises in 2017. We currently have 19 clients. BlueStar has demonstrated an average of 1.7- 2.0-point reduction in user A1C and has clinical trials and real-world data showing improved prescribing and titrating behaviors for providers, along with reduced costs and enhanced medical loss ratio for payers. These outcomes have been published over 40 peer-reviewed publications. Please see <https://www.welldoc.com/outcomes/clinical-outcomes/> for a complete bibliography and access to our library of evidence.

BlueStar's validated clinical outcomes have been translated into economic impact by Truven Health Analytics, a division of IBM Watson, using their MarketScan database of claims from over 120M patients across 1,100 carriers in the US. Through this analysis, BlueStar demonstrated an average savings of \$3,252 per member using BlueStar per year. Please See <https://www.welldoc.com/outcomes/economic-outcomes/> for the full Truven Analysis

Pricing of Services: There is a minimum annual charge of \$60,000 per year. For employers with more than 3500 employees, Welldoc charges per diabetic per month according to the following scale (assumes a minimum of 10% of population has diabetes).

- 3,500-9,999: \$14 PDPM
- 10,000-19,999: \$12 PDPM
- 20,000-99,999: \$10 PDPM
- 100,000-199,999: \$8 PDPM

Website(s) for additional information: www.welldoc.com

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