



State of Nevada PEBP

Utilization Report for Q3



EXECUTIVE SUMMARY

Covered Households

22,660
Prior Period 27.101

Utilization

1.01%
Prior Period 0.65%

Completed Consults

36
Prior Period 22

Personalized Local Support

19
Prior Period 18

Specialty Care Navigation

1
Prior Period 4

Activations

48
Prior Period 170

Net Promoter Score

89
Prior Period 88

Turnaround Time

1.44
Prior Period 2.66

Total Cost Savings

\$365,929
Prior Period \$116.502

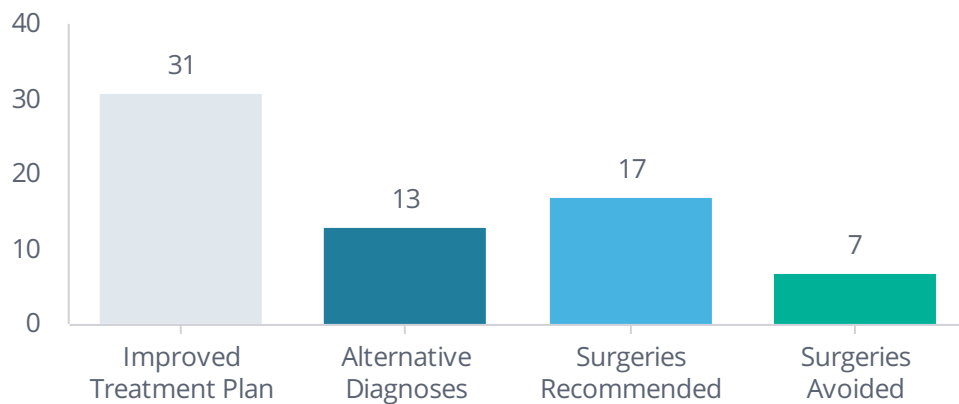
Savings Per Surgery A...

\$48,944
Prior Period \$17.094

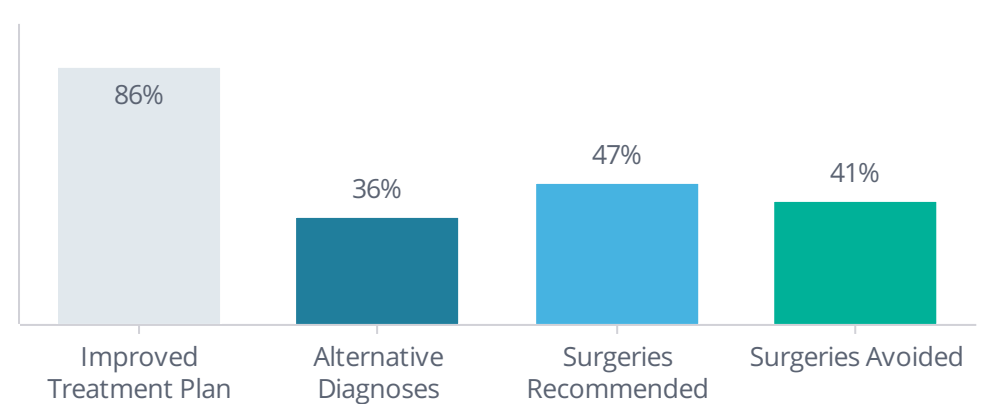
Savings Per Case

\$10,165
Prior Period \$5.296

Clinical Outcomes



Clinical Outcomes Percentage



PROACTIVE OUTREACH PROGRAM

Non-Proactive Outreach Cost Savings Per Case

\$9,243

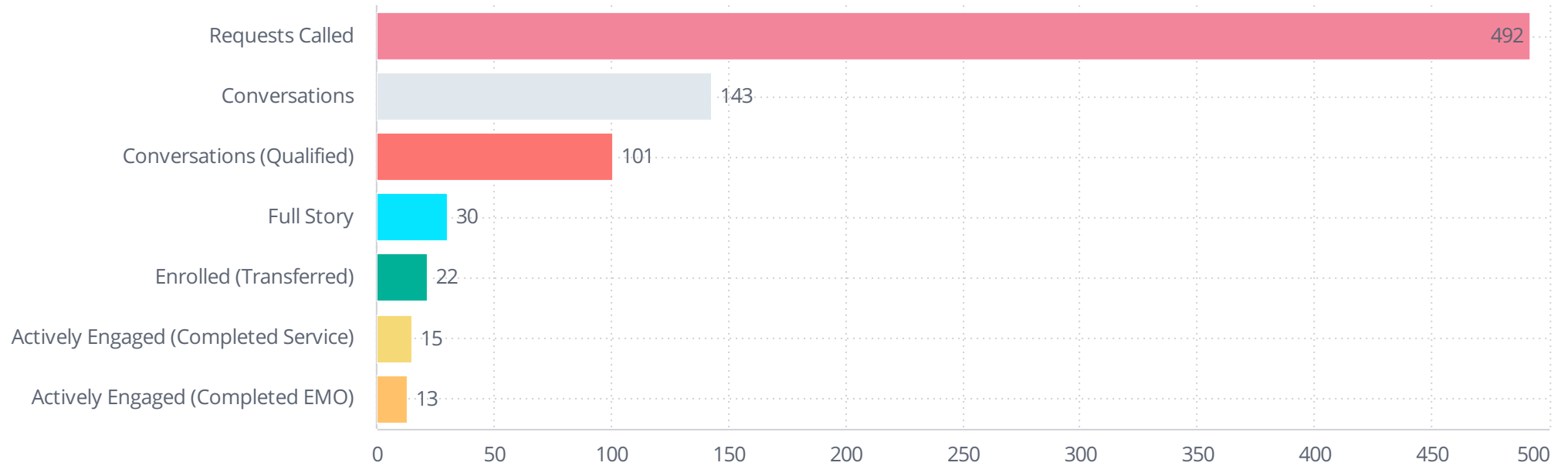
Prior Period **\$5.674**

Proactive Outreach Cost Savings Per Case

\$10,739

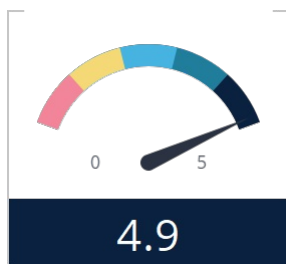
Past Period **\$3.665**

Proactive Outreach Engagement

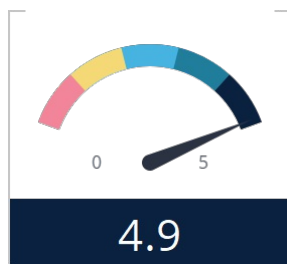


ADDITIONAL INSIGHTS

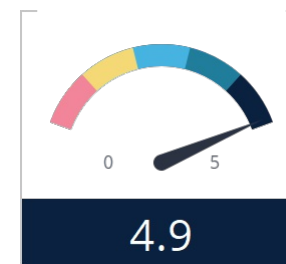
Doctor Care Survey Rating



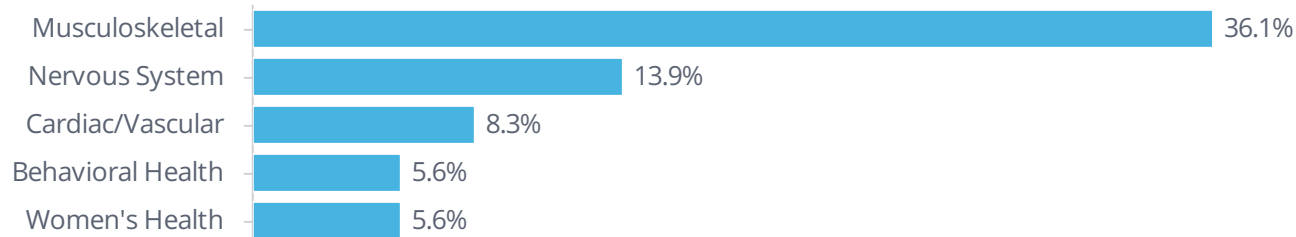
Doctor Expertise Survey Rating



Customer Care Survey Rating



Top Major Diagnostic Categories



Unique Major Diagnostic Categories Served

14

Completed Member Survey

78%

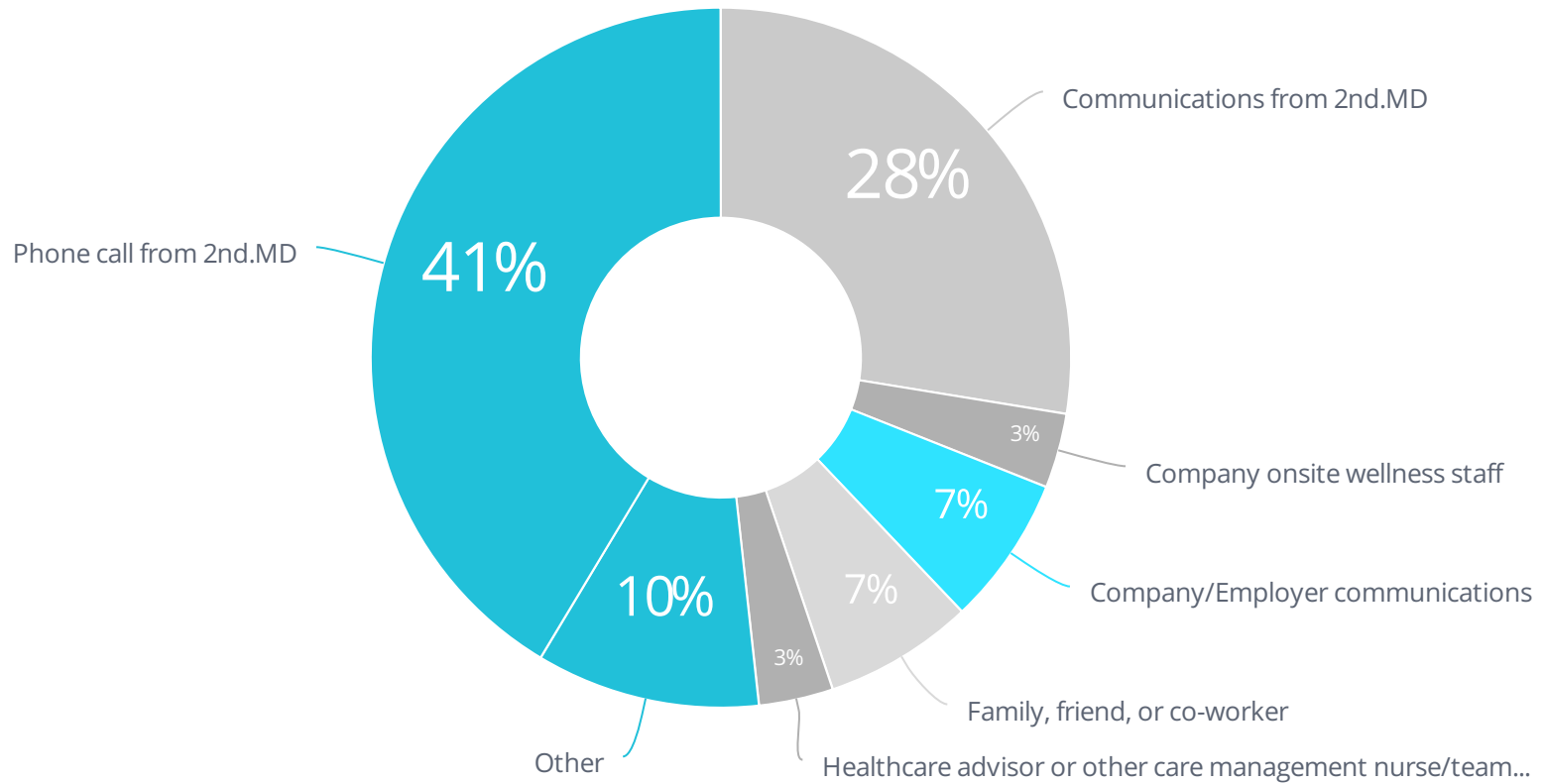
Benefit Satisfaction

97%

SURVEY RESPONDENTS

who said access to 2nd.MD increased their appreciation of their employer's benefits

Member Survey Data: What Reminded Members of 2nd.MD



Definitions

Alternative Diagnosis: The 2nd.MD specialist observed an element of the medical record or patient history that indicates an alternative diagnosis may be more appropriate. Specialist may recommend additional evaluations to confirm or rule out the alternative diagnosis.

Avoided Surgery: The 2nd.MD specialist suggested an alternative treatment plan and member avoided surgery.

Improved Treatment Plan: The member was provided alternative interventions to consider with the risks, benefits, and alternatives articulated so that the member can make a more informed decision.

Consults: Total 2nd.MD Expert Consults. (One completed consult includes member intake, records collection, specialist matching, live conversation with the expert specialist and delivery of a consult summary)

Personalized Local Support: 2nd.MD will provide the member with support and education, which may include recommendations of a local, in-network specialist, if requested by the Member. 2nd.MD will use Member's location and specific case needs to locate a specialist for the member's needs.

Specialty Care Navigation: helps members navigate the complexities of managing their health and achieve better health outcomes. Based on the expertise of our Care Team nurses, it includes education, high-touch coaching, referrals, and network steerage. SCN is available for all specialty conditions, as well as for members who are symptomatic or unsure of where to go for initial diagnostic work-up and treatment. Upon completion of these services, members receive a written summary of all discussion points and any recommended activities, along with a letter to share with their treating physician.

Activations: Number of employees within an eligible population who have actively registered with 2nd.MD's platform (created a username and password). Registered users are typically a good measure of employee engagement and awareness of program and typically goes up year over year as clients communicate.

EOC COST SAVINGS METHODOLOGY

2nd.MD uses an episode of care (EOC) based cost savings methodology that looks at the difference between what the members' local provider recommended to what the member decides to proceed with after their 2nd.MD virtual consultation with an elite specialist. We use various tools to price out these procedures and use averages consistent to the Zip code where the member resides.

We include all cases, even those in which the expert opinion resulted in a cost increase or no savings. Our methodology has been reviewed and accepted by several actuaries at national consulting firms and by health plans who are using our service for their fully insured book of business. We are currently undergoing validation by an independent third party.

The following example describes how we calculate savings. A treating physician recommended lumbar spinal fusion for a 35-year-old male accountant. After video consultation with our elite specialist, the member pursues physical therapy.

Local Provider Recommendation Episodic Care Costs:

MD Visit - \$229
Imaging/Tests - \$292
Surgical Procedure - \$71,672
Medications - \$600
Physical Therapy - \$793
Follow-Up MD Visits - \$260

Net Cost of Procedure Pathway: \$73,846

2nd.MD Specialist Recommendation Costs:

Physical Therapy - \$1,200

Net Difference Between Local Provider Recommendation and 2nd.MD Specialist:

Recommendation: $\$73,846 - \$1,200 = \$72,646$.

CPT codes: 22630, 22612

Return on Investment Calculation:

$\$6,530 \text{ Avg. Savings Per Consult} / \$ \text{ Cost Per Consult} = 3.4$