

# VHC Health saved \$2,834 per participant after year 1 using Hello Heart



### **Background**

VHC Health – a community-based health system providing medical services to the Washington, D.C., metropolitan area – reviewed healthcare claims for its 2,700 adult health plan members and found that cardiovascular disease (CVD) was a top 3 claims cost.

VHC Health's soaring cardiovascular costs are not surprising. CVD is the most expensive chronic disease.<sup>1</sup>

### \$12.6K

Average total medical spending per year for each individual with CVD<sup>2</sup>

### **56%**

U.S. adults with high cholesterol and/or high blood pressure<sup>3</sup> – top risk factors for CVD<sup>4</sup>

### **Solution**

To address CVD, VHC Health partnered with Hello Heart, the only digital therapeutics company to focus exclusively on heart disease and its risk factors. Hello Heart empowers users to understand and manage their heart health, which can lead to better clinical outcomes and significant cost savings.

VHC Health and Hello Heart identified a target population of 1,134 – approximately 42% of their adult health plan members based on CDC data on the prevalence of hypertension.<sup>5</sup>

Hello Heart's best practice user outreach approach drove high enrollment, with 39% of the target population enrolling in the program.<sup>6</sup>



As a health system, we believe that it's especially important to provide our employees with the best healthcare benefits. With Hello Heart, we're helping our staff take control of their heart health while also significantly saving on costs – without impacting domestic utilization.

#### Rita Jensen

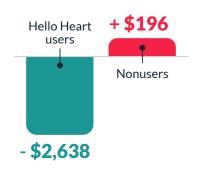
Director of Benefits, VHC Health

# Calculating the Program's Impact on Costs<sup>7</sup>

VHC Health's medical claims from the 12 months before and after implementation of the Hello Heart program were analyzed. Nonusers were identified that were similar to Hello Heart users, and their claims costs were compared over the two periods. The Hello Heart user and nonuser groups were similar respectively in average age (52 and 49) and gender breakdown (68% and 62% female), as well as had comparable total medical spending PMPY (\$9K and \$10K) and CVD-related spending PMPY (\$4K and \$3K) prior to the launch of the Hello Heart program.

\$2,834

Estimated savings per Hello Heart user after year 1 compared to similar nonusers



# Program Participant Summary<sup>6</sup>

Total users: 437

Female-born users: 68%

Average age: 52

Average starting

blood pressure: 133/84

# Additional Findings<sup>7</sup>



On average, Hello Heart users that were hospitalized had approximately 6 fewer days in the hospital versus nonusers.



Fewer inpatient days mean fewer surgeries and fewer expensive diagnostic imaging procedures.



More in-network spending indicates that Hello Heart users were more proactive in seeking preventative care and needed less reactive care, which is typically costly.

<sup>&</sup>lt;sup>7</sup> Based on VHC Health claims data supplied to Hello Heart for approximately 2,700 members, spanning April 1, 2019, to August 31, 2022. Claims were reviewed for 144 Hello Heart users and 511 nonusers who all had cardiovascular disease-related medical spending in the 1 year prior to Hello Heart's launch.







<sup>&</sup>lt;sup>1</sup> This includes heart disease and stroke, which are both related to heart health. Source: Schmidt H. Top 10 Most Expensive Chronic Diseases for Healthcare Payers. HealthPayerIntelligence. February 22, 2022. https://healthpayerintelligence.com/news/top-10-most-expensive-chronic-diseases-for-healthcare-payers. Accessed April 6, 2023.

<sup>&</sup>lt;sup>2</sup> Figure calculated as part of Validation Institute's analysis of Hello Heart cost savings. Source: Validation Institute. 2023 Validation Report. <a href="https://validationinstitute.com/mp-files/hello\_heart\_savings\_2023\_final.pdf/">https://validationinstitute.com/mp-files/hello\_heart\_savings\_2023\_final.pdf/</a>. Published October 2023. Accessed November 19, 2023. (Analysis commissioned by Hello Heart. Report valid through Oct. 2024. Findings have not been subjected to peer review.)

 $<sup>^3</sup>$  Figure calculated using 2017-2020 data from the CDC's National Health and Nutrition Examination Survey. CDC Web site. <a href="https://wwwn.cdc.gov/Nchs/Nhanes/">https://wwwn.cdc.gov/Nchs/Nhanes/</a>. Accessed April 6, 2023. (NOTE: Individuals with high cholesterol were defined as those with \(^2240\) total cholesterol or self-reported using a cholesterol medication. Individuals with high blood pressure were defined as those with \(^2130\) systolic or \(^280\) diastolic blood pressure or self-reported using a blood pressure medication).

Davis J. High Cholesterol and High Blood Pressure. WebMD Web site. https://www.webmd.com/cholesterol-management/high-cholesterol-and-high-blood-pressure. Published June 7, 2021. Accessed April 6, 2023.

<sup>&</sup>lt;sup>5</sup> Based on data from the CDC's National Health and Nutrition Examination Survey. CDC Web site. https://wwwn.cdc.gov/Nchs/Nhanes/. Accessed March 22, 2023.

<sup>&</sup>lt;sup>6</sup> Based on data on file at Hello Heart. Results may vary from employer to employer.