

Your Guide to Buying Advanced Primary Care

A Primary Benefit

Primary care models are everywhere. Here are four aspects you should consider to help you find the one that will differentiate your benefits, delight your employees and reduce your costs.

Value-Based Care. Advanced Primary Care. Onsite Clinics. Near-Site Clinics. Concierge Medicine. You've likely heard of one or more of these. You may even be a current client of one. The challenge is that most of these "solutions" are often anything but. While increasing primary care access is commendable, access alone won't drive the outcomes you're after.

1 Integration

Many of the challenges in healthcare today stem from fragmentation. Providers don't communicate. Data isn't shared. Context is lost. And patients (and their pocketbooks) suffer. As you consider a primary care strategy for your employees, it is important to assess the degree to which these solutions truly integrate with your benefits. Is it one more thing in the pile of point solutions, or does it become the connective tissue that brings these benefits together and furthers your investment?

The apree health philosophy is that for primary care to be impactful, it must be deeply integrated with all other aspects of your plan. Have an existing wellness program? We'll help to drive compliance and utilization. Invested in a diabetes prevention program? Our clinical team will "prescribe" it and follow up with patients to drive outcomes. We also work within your existing benefits structure and provider network to steer members to the right provider, site of service, and pharmacy.

2 Engagement Strategy

While "if you build it, they will come" makes for an intriguing movie plot point, it's not a winning strategy for primary care. Models are underutilized because the burden of action is on the member. It's nearly impossible to be a part of the solution if you're not part of the equation. In your evaluation of advanced primary care providers, press to understand how each plans to draw members in and engage them in proactive and positive health actions.

Our model begins by ingesting demographic and full claims data for our employer clients. This allows us to stratify your population, identifying care gaps and needs for all employees whether they are high-risk or simply maintaining their preventative care. We leverage a multi-channel approach to connect with each member through a unique journey, delivering the right care in the right place at the right time.

3 Business Model

While all primary care models want to get paid for their efforts, there are two aspects to how these payment models are structured that can make or break their success:

- **Incentives:** A capitated model enables the care team to focus on providing high-quality, proactive care rather than seeing a certain number of patients a day to hit a revenue target.
- **PMPM:** A primary care model shouldn't cost the employer until an employee uses services. If a model insists on a "per member, per month"

payment for all employees, regardless of utilization, this inevitably leads to paying for services that are never used.

The apree model is built upon a capitation structure that activates individually as each employee engages with care. This ensures you aren't paying for a solution that isn't delivering care and impact. Our value-based structure aligns our incentives to yours—when you win, we win.


4 Proven Track Record

Across the landscape of healthcare, new models and point solutions pop up daily. There are currently over 350,000 health apps available to consumers,

with more being added all the time. As you evaluate options within primary care (or any health solution), it's imperative that you press for that solution's results with other clients. Can they point to outcomes across the quadruple aim of healthcare? While every sales story is compelling, too often their results are not.

With over a decade of experience, apree health's solution has been deployed nationwide. We are incredibly proud of our track record in delivering clients real value for their benefit dollar. Our care experience is world-class as evidenced by our +86 NPS score. We increase utilization of primary care and preventative screenings – 60% over a 3-year period. And we've lowered the gross total cost of care for our employer clients by 7%.

Use this worksheet below as you consider an advanced primary care solution for your organization.

	Traditional Employer Clinic Model	
Population Health Payment	×	All members, same amount
PCP Payment	PMPM for all employees whether used or not	PMPM only for members that engage
Performance Incentive	Some performance guarantees	Shared risk and savings
Cost to Serve	No scale	Extended Care Team and technology
Ability to Ingest Claims and Demographic Data		✓
Individual Member Engagement Plans		✓
Works With Your Existing Network and Benefits Structure		✓
Leverages Existing Clinical Tools and Programs		✓
Multidisciplinary Care Team (Physicians, Physician Assistants, Nurse Practitioners, Allied, Behavioral Health Clinicians, Diabetes Educators, Health Coaches, etc.)		✓
Embedded Behavioral Health Services		✓
Same and Next-Day Access		✓
Virtual Care Access with Same Care Team		✓
Demonstrated Track Record of Delivering Results		✓

Questions? Contact your benefits consultant to learn more about Advanced Primary Care models like apree health.

1 Utilization and TCOC impact measured through historical trend specific to the market and customer (observed - expected). TCOC is the aggregated PMPM prediction or reduction over all time periods after apree clinic launch. For example, if a client has been with apree for 4 years, the PMPM reduction is the overall apree healthge savings across these 4 years. The time the customers represented in this data set have been with apree health will vary but is at most 5 years, a minimum of 2. PCP capitation payments to apree are not included in the TCOC savings. This data is from EOY 2022.