



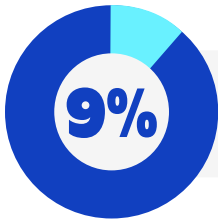
# Trusted, In-Person Help

## A proven solution

Papa created a new kind of care to bring companionship and social support to older adults and other underserved populations when, where, and how they need it most. A growing body of evidence from Papa and its partners show this novel approach reduces healthcare costs, improves healthcare utilization, and advances important healthcare actions. Papa's program has been evaluated across populations and the findings are clear: the greater the need, the greater the impact—for both members and their health plans.

## Papa reduces costs & improves healthcare utilization for Medicare Advantage members

Members who have access to in-home social support demonstrate more informed use of healthcare services, often seeking lower-cost care and recovery at home over in-patient or facilities-based services.



**reduction in medical costs** is experienced by members with one or more Papa visits.

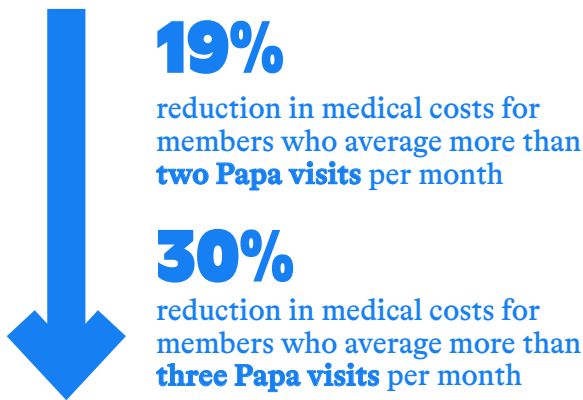
This reduction is driven by favorable changes in healthcare utilization, including:



### Did you know?

Most of a person's perceived needs after a hospital discharge are social, not clinical. In fact, **40% of readmitted patients** report that a challenge at home contributed to their hospital readmissions, including unmet social needs, like transportation and food, and a lack of social support.

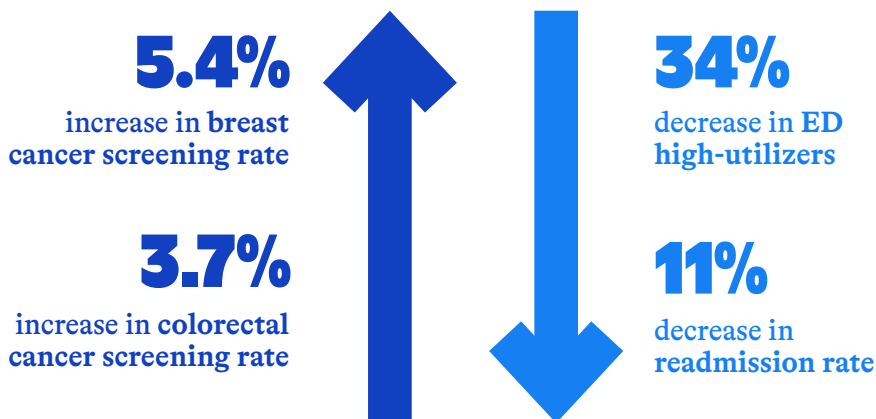
Completing more Papa visits was associated with even greater cost reductions:



## Methodology

A national actuarial firm conducted this analysis leveraging standard claims cost analysis protocol. A total of 2,386 Medicare Advantage members from a regional health plan were enrolled in Papa between January 2021 through August 2023, utilized at least one visit, and had sufficient claims data for the analysis. Program impact was analyzed using risk-normalized allowed claims costs and utilization eight months prior to and eight months following program enrollment.<sup>1</sup>

# Papa encourages preventive and more informed use of care in Medicare Advantage



## Did you know?

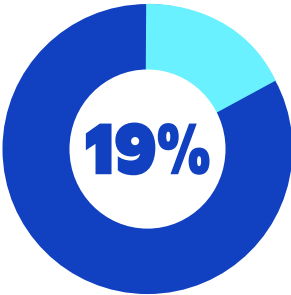
The average cost of treating 10 common primary care treatable conditions at a hospital ED is **12x higher than visiting a physician's office** and **10x higher than going to an urgent care center.**

## Methodology

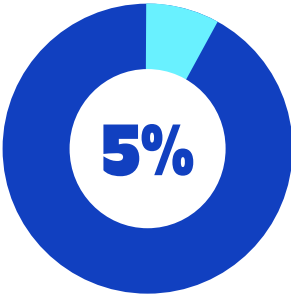
Claims-based analysis conducted by a leading actuarial firm used data from SummaCare on 1,420 Medicare Advantage members engaged with Papa's services. Results represent members who had at least one visit with Papa in 2021 and had historical claims data from 2019. Papa participants were compared to a matched cohort of SummaCare members who did not use Papa's services (members were matched one-to-one using a validated risk scoring model).<sup>2</sup>

# Socially isolated Medicare Advantage members see even greater results

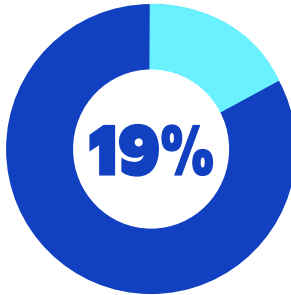
Addressing social connection improves preventive care trends and reduces cost of care.



reduction in total cost of care



reduction in emergency department visits



increase in office visits



## Did you know?

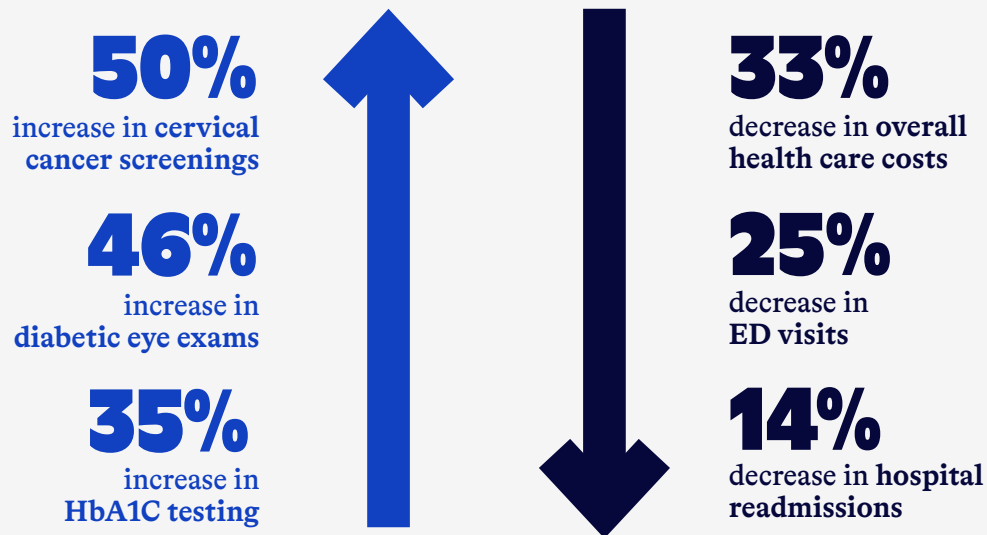
Increasing primary care visits leads to better preventive healthcare, earlier and more accurate diagnoses, and a reduction in emergency department visits—the most costly site for routine care.

### Methodology

Eligible members were identified as “socially isolated” by health plan’s proprietary algorithm. Health plan conducted the claims analysis and results compared data from 2021 to 2019 in order to use a non-COVID comparison year. Outcomes represent active members (n=188), defined as members who had at least one Papa visit, had not deceased during the analysis period, and had not opted out of the program or call list at any point.<sup>3</sup>

# High-risk Medicaid members experience the highest savings

Proactively addressing social drivers of health among those with higher needs advances preventive care trends and improves health care utilization.



## Methodology

Meridian Medicaid members aged 45+ with a high rate of ED utilization (5+ ED visits within the previous year) across Michigan were eligible for participation in Papa. Analysis compared data from before program enrollment to data six months post-enrollment. Results represent “active” members (n=163), who had at least one Papa visit during the pilot period (May-October 2021).<sup>4</sup>



## Did you know?

It's been estimated that overuse of the emergency department for preventable or non-urgent cases costs the U.S. healthcare system **\$32 billion annually**.

## REFERENCES

- 1 REGIONAL HEALTH PLAN 2024
- 2 SUMMACARE 2022
  - a. Innovation in Aging
  - b. Academy Health Annual Research Meeting
- 3 WASHINGTON-BASED HEALTH PLAN 2022
- 4 MERIDIAN 2022

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