# Using new member data to **proactively** inform disease management

How Member Insights, a data analytics offering from Quest Diagnostics, helped a top health plan

It can be difficult for a health plan to understand the health status of its newly covered members. That's why Quest Diagnostics offers Member Insights, a data analytics service that provides up to 2 years of available lab history\* on new members prior to coverage under a health plan.

Member Insights can help health plans understand disease burden and progression, allowing earlier action when an intervention often has the most impact. The offering is particularly useful in helping to identify new members with chronic conditions, such as **diabetes and chronic kidney disease (CKD).** 



At least **1 in 3 adults** will develop diabetes in their lifetime<sup>1</sup>

# **Identifying** disease risk with Member Insights

## **Situation**

In 2017, a large, national health plan **enrolled over 1 million new members** to establish more than **5 million Medicare Advantage members**. To improve outcomes and reduce the overall cost of care for these members, the plan needed a way to understand its new members' health status sooner for earlier care interventions—versus waiting for the first claim to come in.



\$16,752

Average **annual cost** to care for a person with diabetes<sup>2</sup>



~30M

US adults have evidence of CKD3



~\$100B

**Annual cost** of end-stage renal disease for US healthcare system<sup>3</sup>



\$33B

**Savings** from eGFR intervention between 2000 and 2010<sup>4†</sup>

<sup>\*</sup>The results are provided in compliance with HIPAA and based upon data contained in the existing datasets.

 $<sup>^{\</sup>dagger}$  eGFR = estimated glomerular filtration rate

# Improving outcomes for new members with diabetes and CKD

## Solution

The health plan used Quest Member Insights to understand the health status of its new members. Specifically, Quest analyzed diabetes and chronic kidney disease risk.

Hemoglobin A1c (Hgb A1c) is used as a primary test to diagnose and evaluate control of diabetes, and the American Diabetes Association recommends at least 2 tests annually.<sup>3</sup> Among the 300,000 new members who had records with Quest, the report identified over 110,000 members with a Hgb A1c test result(s)—revealing nearly **30,000 at-risk members** who should undergo further evaluation. Quest and the health plan defined a **successful achievement of an A1c goal** as a second test within 6 months of the initial test.

A1c testing/status	# of members at risk	Action plan
Diabetes diagnosis and no Hgb A1c results in subsequent 6 months	~22,000	<ul> <li>Encourage testing and physician intervention</li> <li>Analyze member time course of A1c to consider intervention</li> <li>Collect additional data for HEDIS® reporting</li> <li>Look at co-morbidities and identify intervention strategies</li> </ul>
Excellent control (Hgb A1c<7%)	~4,000	<ul><li>Encouragement</li><li>Appointment and testing reminders</li></ul>
Potentially undiagnosed or not excellent control (Hgb A1c≥7%)	~4,000	<ul><li>Examine trends</li><li>Identify intervention strategies</li></ul>

Quest also analyzed estimated glomerular filtration rate (eGFR) screenings, which are used to help **determine the rate of progression for chronic kidney disease**. eGFR and the albumin-creatinine ratio are the two tests that establish stage/rate of progression. The analysis showed that of the over 190,000 new members with eGFR test results, **48% had an eGFR under 89**—a possible early indication of the disease.

CKD stage	# of members at risk	Action plan
Stage 3a and 3b (eGFR of 45–59 and 30–44 [ML/MIN/1.73M2])	~21,000	<ul> <li>Involve telemedicine consultation</li> <li>If not previously diagnosed, refer for confirmatory testing and retesting</li> </ul>
Stage 4 and 5 (eGFR of 15–29 and <15 [ML/MIN/1.73M2])	~3,000	<ul><li>If no nephrologist or dialysis, refer to nephrologist</li><li>Verify referral</li></ul>

### Results

As a result of this earlier and potential health status identification—and subsequent intervention, including potential enrollment in disease and care management programs—Quest is helping the health plan lower costs and improve care for thousands of members.



Contact your Quest Diagnostics health plan representative to learn more about our member-focused analytics offerings.

#### References

1. Centers for Disease Control and Prevention. A snapshot: diabetes in America. [Infographic]. Accessed September 13, 2019. https://www.cdc.gov/diabetes/pdfs/library/socialmedia/diabetes-infographic.pdf. 2. Riddle M, Herman H. The cost of diabetes care—an elephant in the room. American Diabetes Association. Accessed August 29, 2019. https://care.diabetesjournals.org/content/41/5/929. 3. Centers for Disease Control and Prevention. Chronic kidney disease basics. Last reviewed: December 6, 2018. Accessed October 3, 2019. https://www.cdc.gov/kidneydisease/basics.html. 4. Vanholder R, Annemans L, Brown E, et al. Reducing the costs of chronic kidney disease while delivering quality health care: a call to action. *Nat Rev Nephrol*. 2017;13:393-409. doi:10.1038/nrneph.2017.63.

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