

Simplifying Healthcare and Improving Outcomes



Driving Personalized Experiences

Today's data and technology allow us to understand health more holistically, personalize healthcare, and empower people – all of which improves individual health and advances health equity. In the past year, we've continued to put our vast data and proprietary digital platform to work to better serve our members.

The Sydney Health App

Members using the Sydney Health Platform benefited from improved convenience in 2023, including one-click access to care provider visits; more detailed medical, pharmacy, dental, and vision services benefits and claims information; cost transparency and comparison tools; and health information and resources tailored to their individual needs.

In 2023, Sydney Health had a 14% increase in member visits from 2022.

Find Care

Find Care, available through Sydney, makes it easier than ever for Commercial, Medicare, and Medicaid members to choose the care providers and services that work best for them.

For a growing number of our members, Find Care offers our patented Personalized Match feature, which automatically takes a member's health needs into account during a search, making it even easier to find the high-quality, cost-effective care providers that best match their requirements. More than a million members have visited a recommended provider through the Personalized Match feature.

For Commercial health plan members, Personalized Match also uses leading-edge predictive analytics to identify when a member is likely due for routine care, such as a colonoscopy, or when the member needs a specific procedure. When a procedure may be needed, the member is made aware through a personalized message on their homepage. Members are connected to the Personalized Match feature, where they can search for high-quality care providers ready to meet their individual healthcare needs.

The Find Care and Personalized Match features won the 2023 Blue Cross and Blue Shield Association Brand Innovation Award, in recognition of their power to proactively connect members to care providers who meet their specific needs.



The Power of Virtual Care

Preventive care, urgent care and management of chronic conditions all became more accessible for members in 2023 through the Sydney Health platform's Virtual Care Center. Members can arrange a scheduled or on-demand virtual visit with care providers, engage in phone or text chat with providers, or plan remote monitoring for chronic conditions – all for low or no additional cost.

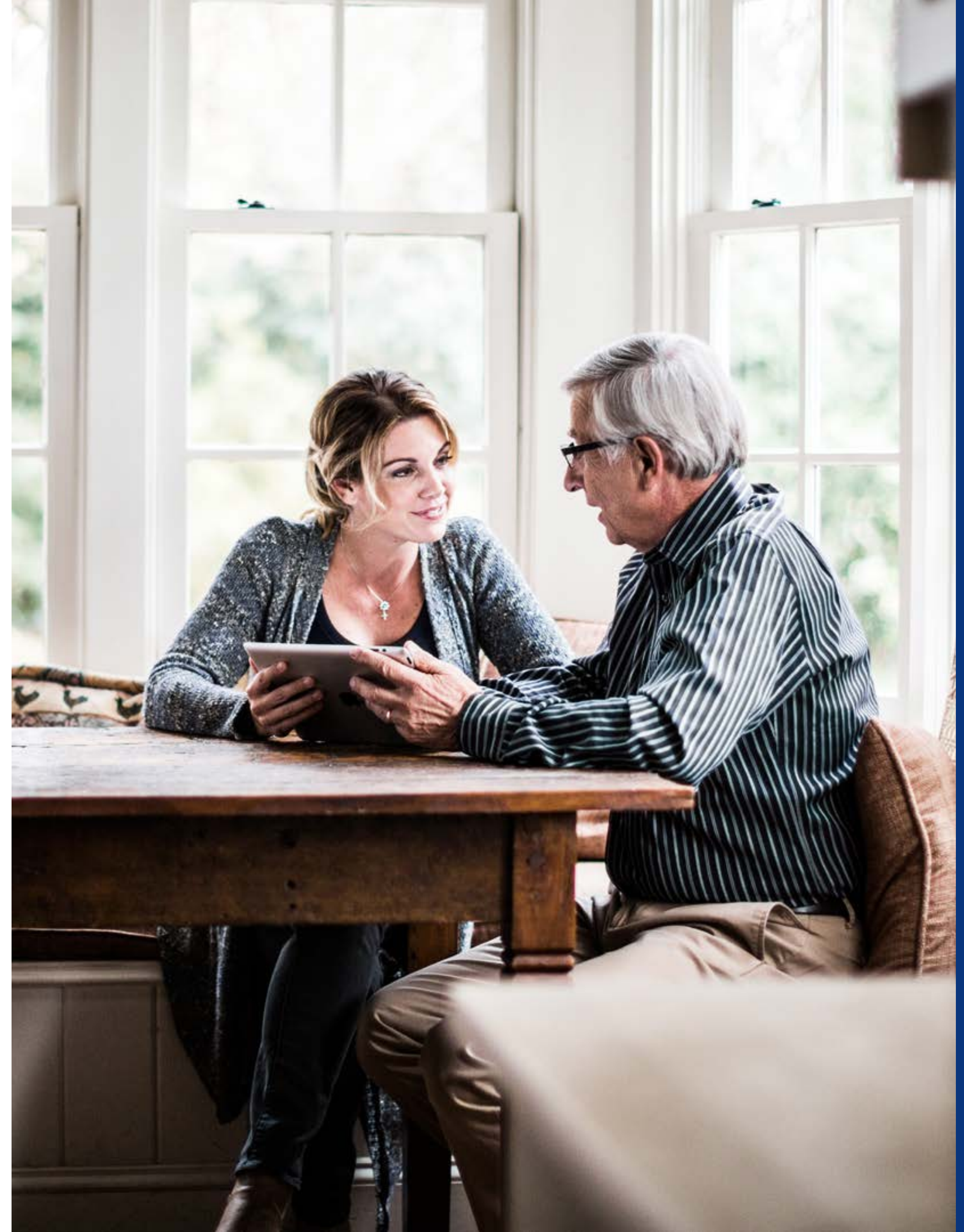
The updated Virtual Care Center makes it simpler for our Commercial members to get the personalized care they need, when they need it. Services include:

- Scheduled primary care visits for prevention, wellness, and treatment of common illnesses.
- 24/7 urgent care through text, chat, or video for common concerns such as colds, flu, and allergies.
- Annual wellness visits encompassing a comprehensive health review, age-appropriate screening, routine lab-work, and an updated personalized care plan.

- Management of chronic conditions such as diabetes, high blood pressure, and asthma.
- Nutritional consultations.
- Mental health services.
- Physical/occupational therapy sessions.

4 out of 5 people report getting what they need from their visit with a virtual care provider.

[Learn more about our virtual-first health plan offerings.](#) 





Supporting Our Members During Medicaid Redeterminations

After the federal government ended the COVID-19 Public Health Emergency and resumed Medicaid eligibility redeterminations, millions of people were at risk of losing coverage. Our affiliated plans launched the Ready-Set-Renew campaign to help reach Medicaid members with a resource-rich website providing coverage options and other free or low-cost assistance related to their health. Our research indicates that many unenrolled members are facing barriers to re-enrollment, including awareness of the process, and required actions to maintain coverage.

We continue to conduct an extensive renewal campaign that educates people through in-person and online events. Through these efforts, we have reached over three million people as of 2023.

Leading the Industry with [MyHealthBenefitFinder.com](#)

One of the most powerful resources we launched in 2023 was [MyHealthBenefitFinder.com](#), an award-winning online tool available to all people with internet access, regardless of whether they are a member of an Elevance Health-affiliated health plan.

Using the responses to five simple questions on household income, family size, and other factors, the tool determines an individual's health coverage options for Medicaid, Medicare, or an ACA plan. In addition to providing information on eligibility for additional state and federal benefits, users can search for thousands of free or low-cost resources and programs addressing life needs such as transportation, housing, childcare, utility assistance, and education, among others.

My Health Benefit Finder was recognized in [Fast Company's 2023 Innovation By Design Awards](#) honoring innovative products, services, and environments designed to improve people's health and solve problems in the healthcare industry.

[Learn more about how we are supporting employers during Medicaid Renewals.](#) 

Working in Partnership with Care Providers

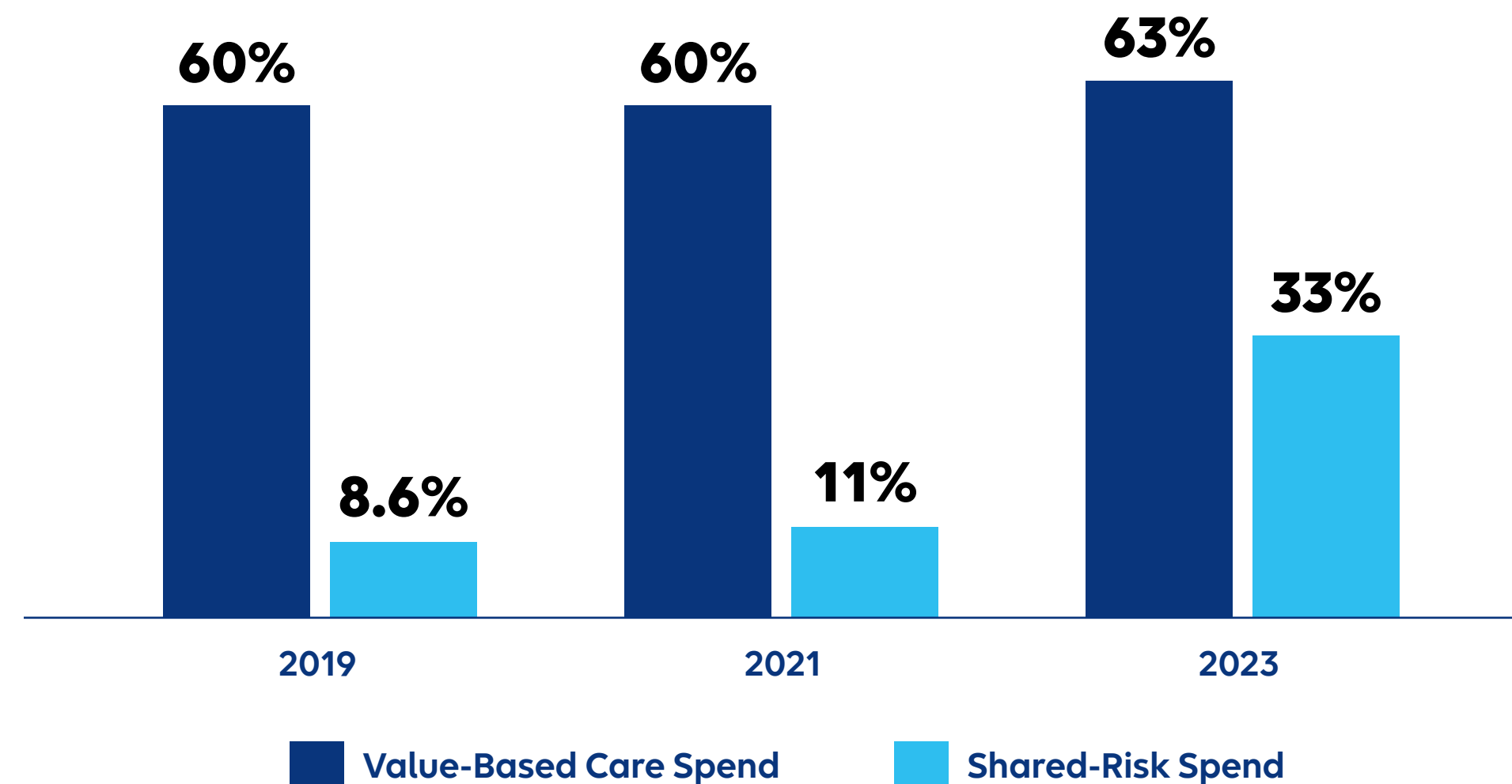
When we work together to improve all facets of health – physical, behavioral, and social – we can strengthen and simplify the healthcare delivery system. This is why we collaborate closely with care providers to achieve our common goal of helping people lead healthier lives.

Value-based care allows care providers the freedom to treat the unique needs of patients and communities, while at the same time meeting evidence-based standards that help ensure all consumers benefit. Unlike traditional fee-for-service models, which pay doctors and hospitals based on the number of services they perform, value-based care incentivizes improved health outcomes.

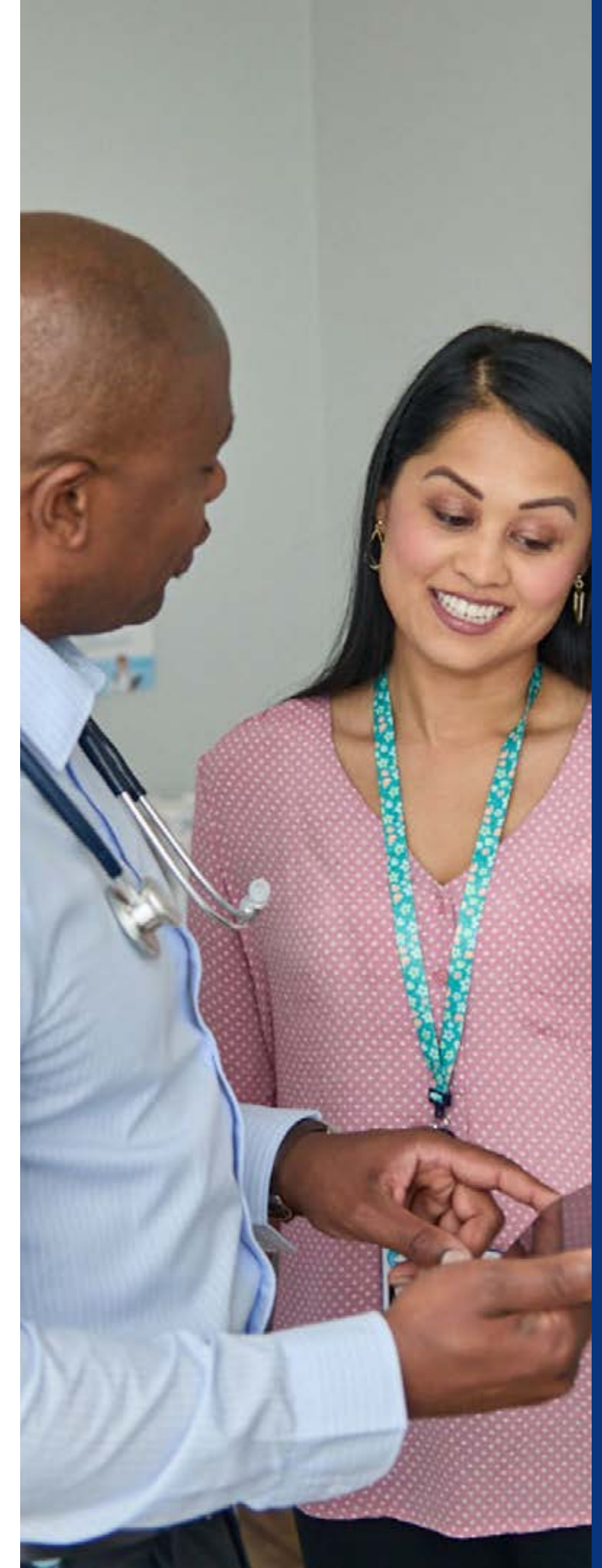
Additionally, value-based care is helping care providers financially; in 2023 alone, more than \$1 billion in additional payments from our affiliated health plans were earned by value-based care providers.

Value-Based Care Spend Penetration

Of our total medical spend in 2023, 63% was in value-based care and 33% in shared risk — triple what it was two years earlier. These arrangements drive positive health outcomes across all our lines of business.



[Learn more about our commitment to value-based care in our Advancing Health Together Report.](#) ↗





Obstetrics Practice Consultant Program: Value-based Care in Action

The Obstetrics Practice Consultant (OBPC) program supplies care providers with data about their practice's maternal health outcomes, which in turn helps care providers deliver evidence-based care and improve patient experiences. OBPCs are clinicians with obstetric specialty practice expertise who collaborate in person and virtually with over 3,700 care providers in 24 Medicaid markets. They serve as local, one-to-one, practice-level support, linking the care provider, patient, and payer, supporting better health outcomes and providing timely and relevant data.

95% of care providers say they are satisfied with the program, and 94% report finding the information, support, and resources of the OBPC very or extremely useful.

When the Obstetrics Practice Consultant program was paired with a value-based care arrangement such as the OB Quality Incentive Program (OBQIP), it helped to lessen administrative burden and improve outcomes. Practice consultants provide data that supports care providers, which in turn helps care providers deliver evidence-based care and improve patient experience. The OBQIP program distributes financial incentives to care providers who achieve high-quality performance.

Our support for care providers through value-based care partnerships is making a difference:

- 67% increase in postpartum visits for care providers participating in our OBPC program.
- 6.5% higher rate in breast cancer screening rate for Commercial members.
- 19.2% higher rate in better blood sugar control in Medicare members with diabetes.

[Learn more about our provider enablement and quality-improvement programs in our Advancing Health Together Report.](#) 





The Value of Integrated Care

We focus on delivering whole health for our members by connecting physical, behavioral, social, and pharmacy care and capabilities through Carelon, our broad portfolio of integrated healthcare services. Carelon connects the dots of care for people with complex chronic conditions or multiple healthcare needs through the integration of Care Delivery and Enablement, Behavioral Health, Pharmacy, and Insights and Analytics.

 **Care Delivery and Enablement**

 **Behavioral Health**

 **Pharmacy**

 **Insights and Analytics**

The Concierge Care Program: Helping Members Manage Complex Needs

People living with a chronic health condition such as cancer or Crohn’s disease can find it challenging to manage the complex care they need.

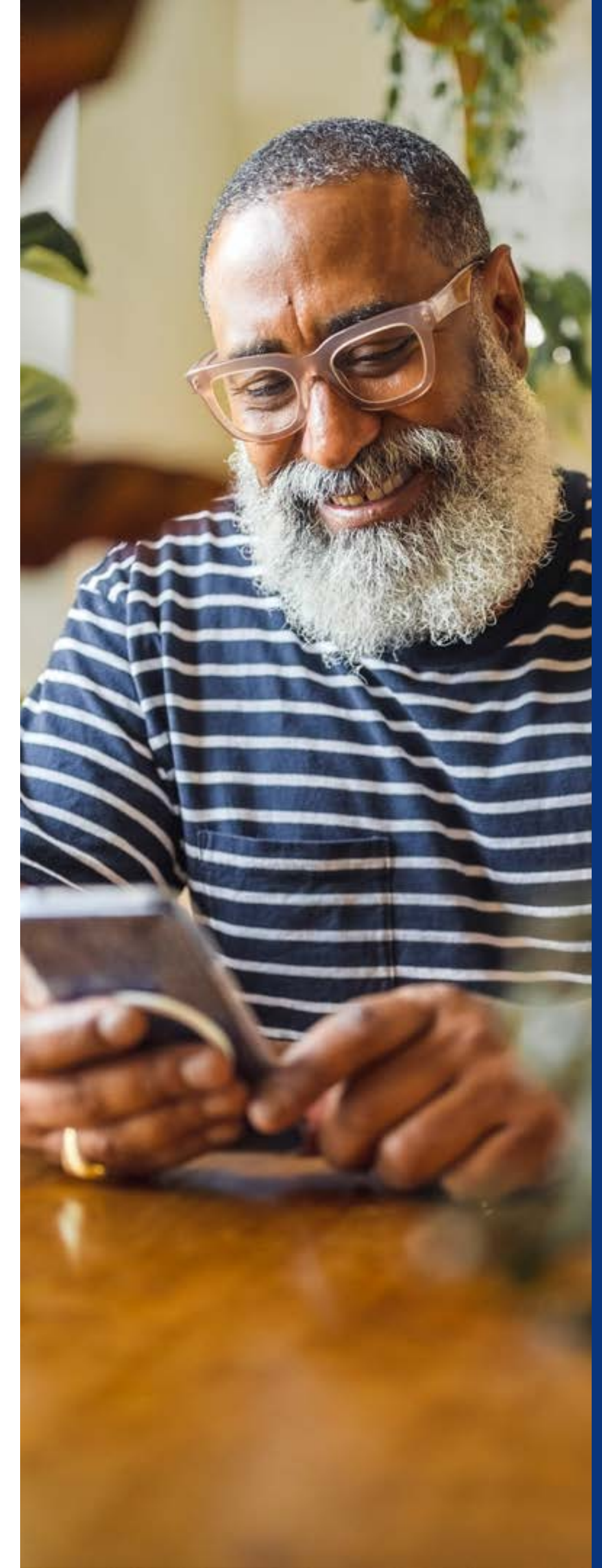
They may develop new symptoms, have concerns about their medication, or notice a change in their health. It can also be hard to stay on track with a healthy lifestyle while managing a chronic condition. We are meeting these needs with our digital concierge care program, which includes an app designed to help members manage their health with the support of a dedicated case-management team.

Digital concierge care is making a difference. Among enrolled members:

- 60% are actively engaged with the program app.
- Over 50% initiate chats with their care team.
- 76% are using the app to complete surveys and track health data.
- For members in the app’s oncology program, emergency department use has fallen by 39%.
- For those with Crohn’s disease, 25% report a decrease in symptoms and flares.

The digital concierge care program won a platinum 2022 eHealthcare Leadership Award for Best Care/ Disease Management.

[Learn more about our digital concierge care program.](#) 





Post-Acute Care Solutions: Supporting Members in Recovery

Post-acute care – support after a hospitalization and inpatient stay due to illness or medical procedure – is a crucial part of a person’s recovery process and whole health. In 2023, our Carelon Post-Acute Solutions (PAS) significantly expanded the Post-Acute Institutional Management (PAC-IM) program.

[Learn more about our approach to post-acute care.](#) 

Behavioral Health Support

Behavioral health is as important as the physical and social drivers that impact a person’s whole health, and we are working to provide even greater access to equitable, evidence-based behavioral health treatment options.

The Crisis Center of Excellence

In 2023, we launched the national Crisis Center of Excellence, a Carelon Behavioral Health initiative promoting evidence-based best practices in crisis systems of care. The Crisis team is focusing on research, quality, analytical insights, policy, and advocacy and offers training and support to state and local crisis systems, health plans, and industries. The work of the Center includes:

- Standardization of crisis quality metrics.
- Provider recognition for adherence to best practices.
- External training for providers of crisis services.
- Training for all Elevance Health contact center associates.
- Monthly workgroup for information sharing and best practices.
- Data collection for research and policy analyses.
- Advocacy, policy promotion, and promulgation of public policy.



Simplified Pharmacy Care

Access to prescribed medicines is essential to whole health. We are streamlining the process to ensure members get the care they need with ease, convenience, and support to stay on track.

Partnerships with Independent Community Pharmacies Help Close the Rural Healthcare Gap

Research shows that people visit pharmacies twice as often as they visit their care provider and that pharmacists can have a positive impact on chronic disease outcomes when they help customers manage their medications. For people living in rural and underserved areas, local independent pharmacies can be pivotal points of care for managing complex or chronic health conditions.

In 2021, CarelonRx began partnering with Community Pharmacy Enhanced Services Networks (CPESN)[®] USA, a network of independent community pharmacies, to support Medicaid members in managing their medications. Using data-driven criteria, CarelonRx identifies clinically high-risk members and alerts their community pharmacy. The pharmacy then contacts the member directly to offer an array of medication-management support.

A study by the Elevance Health Public Policy Institute showed that Medicaid members supported by a CarelonRx and CPESN[®] USA partnership during a two-year period showed improved outcomes for mental health conditions, asthma, and chronic obstructive pulmonary disease (COPD) compared to outcomes before participation.

Benefits included:

- 17.9% fewer emergency department visits.
- 30% fewer inpatient admissions.
- 29% greater adherence for those previously not taking their anti-anxiety medication.
- 44% greater adherence for those previously not taking their anti-psychotic medication.
- 45% greater adherence for those previously not taking their antidepressant medication.
- 41% improved the management of their inhalers for respiratory conditions.
- Medical cost savings in all categories.

Expanding Access with BioPlus

In 2023, CarelonRx acquired specialty pharmacy BioPlus, allowing us to scale our offerings and promote the affordability of limited distribution drugs. This acquisition helps our organization meet the specialty drug needs of our clients and customers with a whole-health approach, supported by integrated services and tailored programs across Elevance Health and Carelon.

With its streamlined services and infrastructure, BioPlus is ensuring less administrative burden for providers, allowing them to focus on informed, cost-effective decisions for their patients.

It also boasts a time-to-start-therapy guarantee that's 3 to 4 times faster than the competition and offers oncology patients "hope in 24 hours," guaranteeing all new oncology patients' prescriptions ship within 24 hours of a prescription being written by a care provider.

[Learn more about enhancing our specialty solutions.](#) 

The Whole Health Index: A Leading-Edge Tool for Better Health

The Whole Health Index (WHI) is an industry-leading assessment tool developed by Elevance Health for defining and measuring the whole health of individuals and populations. It includes 93 inputs from three domains: Social Drivers, Global Health, and Clinical Quality. WHI methodology has been validated by Mathematica, published in the New England Journal of Medicine's Catalyst, and is patent pending.

When we understand someone's very specific needs through the WHI, we can provide personalized care that can advance health equity and improve health outcomes. The WHI can be used by all Elevance Health-affiliated health plans, as well as select external organizations who want to better understand overall population health. When used by Elevance Health-affiliated health plans, WHI data is available at the individual level. When used by external organizations, WHI data is accessible to the county level and always de-identified and encrypted. As of 2023, WHI data is available externally for two states, Virginia and Missouri.

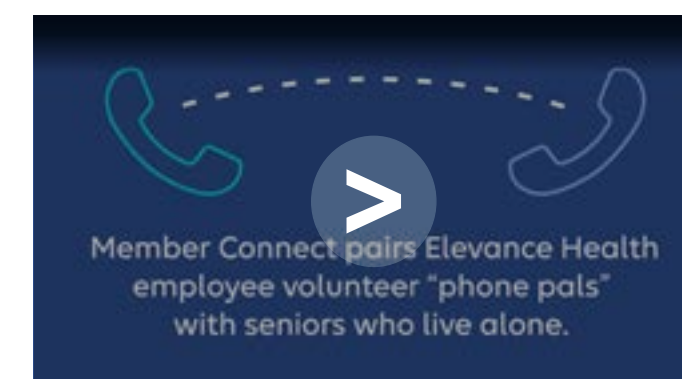
The WHI was developed by an expert panel of clinicians, subject matter experts, and population health researchers. It incorporates the National Academy of Medicine's Vital Signs framework, a set of evidence-based measures considered key to optimal health, and it has been assessed for validity and reliability by Mathematica, an independent research and data analytics consultancy.

The Whole Health Index At Work

The WHI has been calculated for over 40 million people served by our affiliated health plans across all lines of business. Using the results, we are deploying strategies, programs, and interventions aimed at supporting the people and communities who most need our help. For example, before the 2023 flu season, we identified 25% of our members across our Commercial, Medicare, and Medicaid businesses with lower-than-average WHI scores. We then launched a campaign to help these members learn about and get the vaccine. Data from this effort shows that these members were up to 19% more likely to get the vaccine than other groups.

We will continue to lead the industry in improving how we measure whole health to best support our members with personalized and equitable healthcare.

Partnerships were created among our health plan affiliates, care providers, and community health organizations to improve health outcomes for these members. Taking a whole health approach in this way and bridging clinical and social programs increased member engagement and positive trends in health outcomes.



Watch: Harnessing Data with the Whole Health Index