



• LIVE WEBINAR

Treating vs. Referring: The Role of Direct Primary Care in Managing Cost



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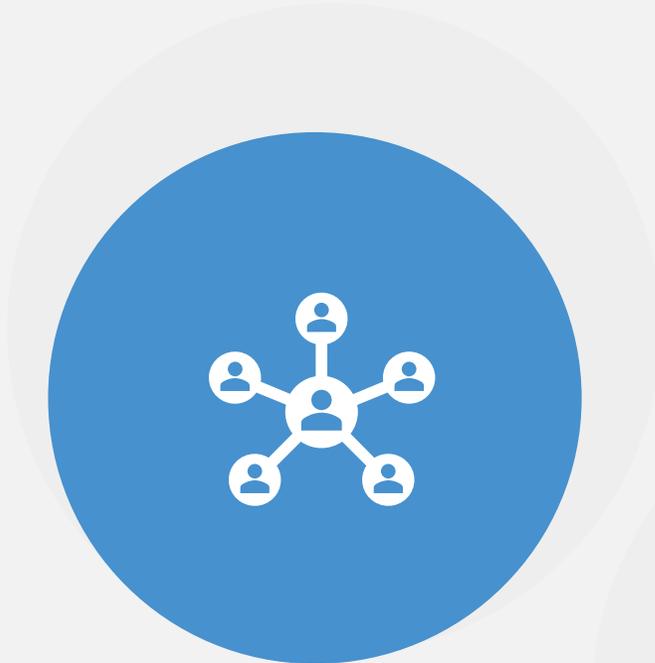
Who We Are



Transparency



Access to Data



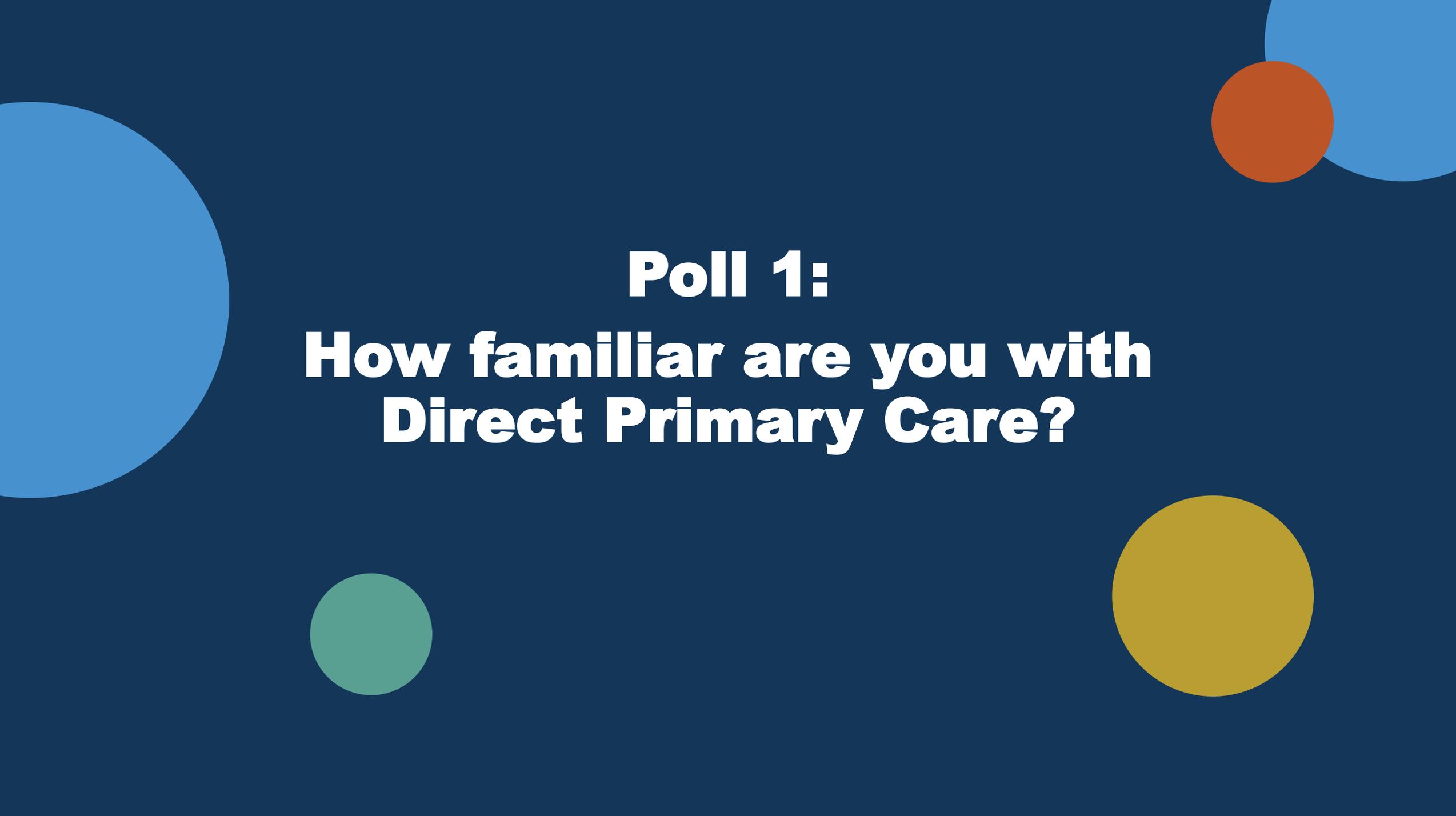
Aligned Incentives

The logo consists of two overlapping circles, one light blue and one slightly darker blue, positioned to the left of the text.

hint connect



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Poll 1:
**How familiar are you with
Direct Primary Care?**

What is DPC?

DPC is an incredibly simple but effective way to anchor patients in primary care and improve health outcomes



Unlimited Care

- Preventive care
- Chronic disease management
- Urgent care
- Coordination with Specialist care



No Copay

- \$0 Copay, eliminating financial barriers to accessing care
- No claims billed



Unparalleled Access

- 24/7 access
- Same or next day appts
- No wait times
- Average 38 minutes per visit
- Unlimited virtual consults: video, phone, text & e-mail

What We Do: 3 Ways to Save



Cost Savings

Employers only pay for the healthcare they consume. All savings from the claims account stay with them.



Distributions

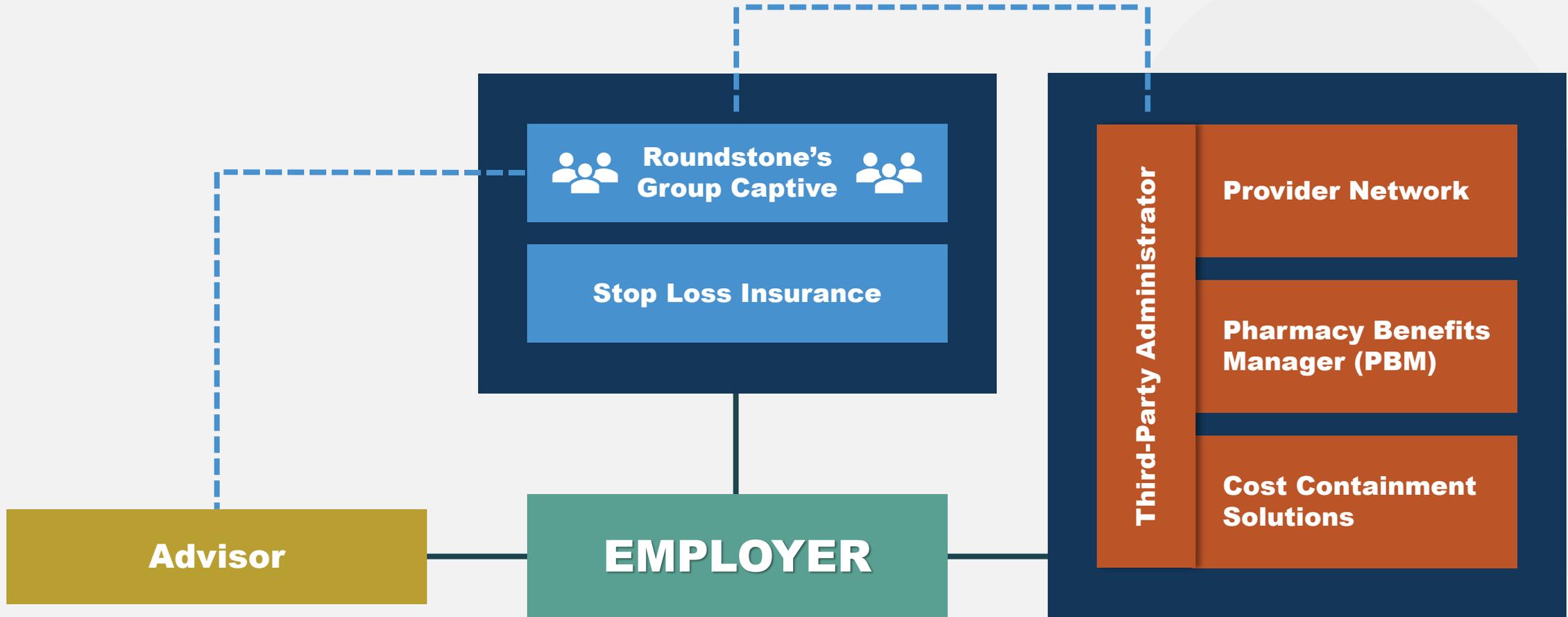
Unused premium from employers' pooled captive funds are returned annually to employer clients on a pro rata basis.



Pharmacy Rebates

Transparent and pass-through PBMs (Pharmacy Benefits Managers) send 100% of rebates and pharmacy savings back to employers.

Key Players in Your Self-Funded Plan



How We Do It: Preferred Bundles

Leverage our success for your benefit.

Third-Party
Administrator
(TPA)



Pharmacy Benefit
Manager (PBM)

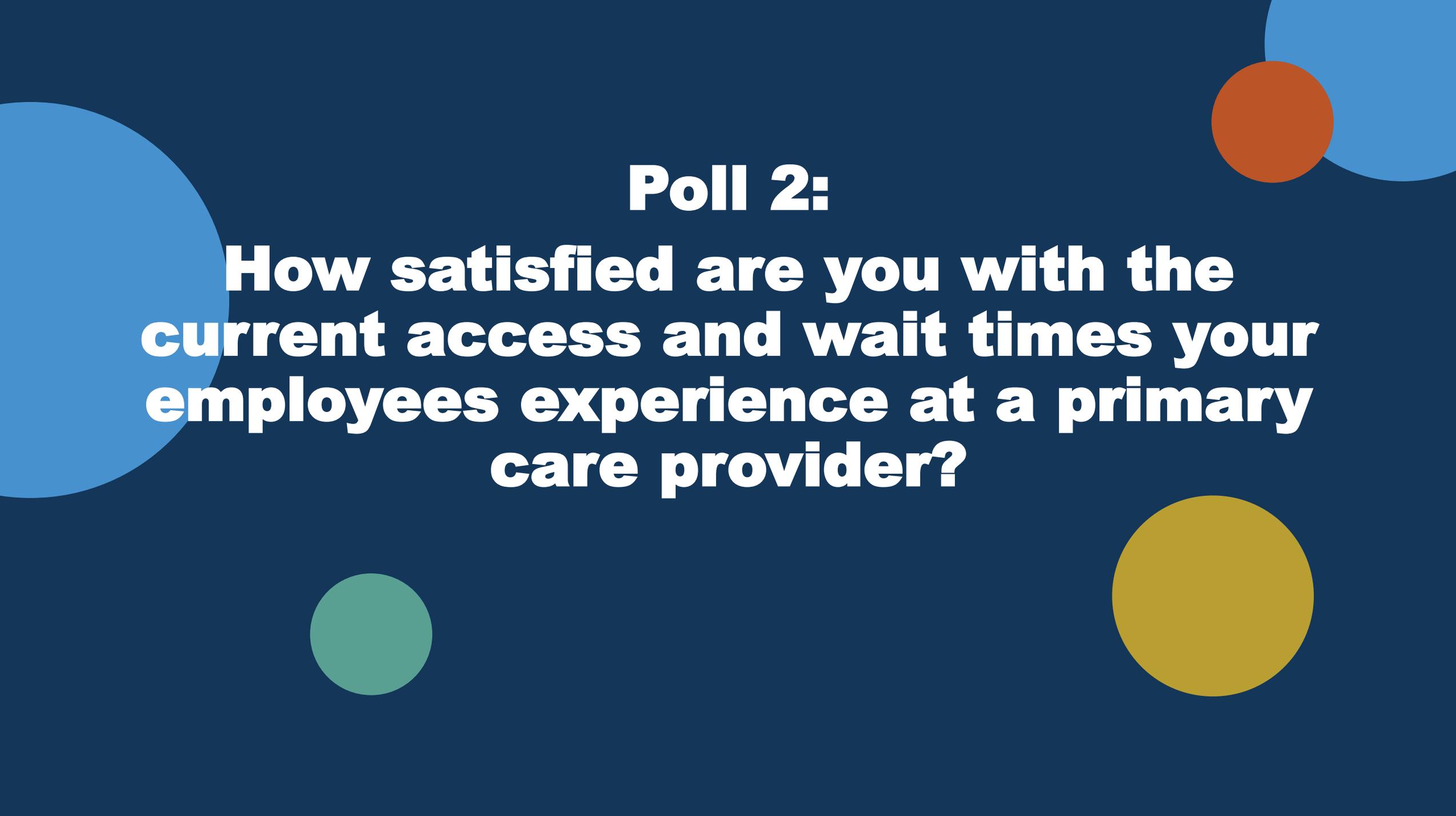


Network



Point
Solutions





Poll 2:

How satisfied are you with the current access and wait times your employees experience at a primary care provider?

Misaligned Incentives in Primary Care

Primary Care Incentives impact the rest of the healthcare journey.

Traditional provider payment models incentivize high volume over quality

- Provider sees more patients, patients get longer wait times and shorter appointment times.
- Providers have less time with patients to identify long term issues and address chronic conditions.

Hospital-owned primary care practices do not improve outcomes

- Primary care practice becomes revenue stream for hospital. Hospital-owned primary care practices refer members to hospital-owned specialists, imaging, and procedures. Higher risk of unnecessary care – more services, more expensive services, worse outcomes.

Employer Outcomes

Employers experience a reduction in healthcare utilization and claims cost in higher cost settings due to accessibility of primary care and improved employee health



Reduction in Claims Cost

Compared to control group



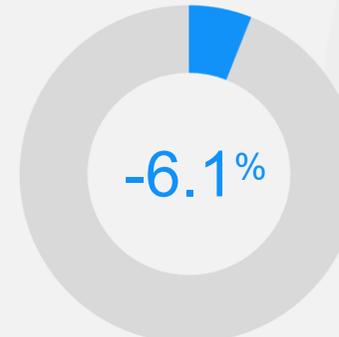
Reduction in ED Visits/1000

Compared to control group



Reduction in IP Hosp Admit Rate

Compared to control group



Reduction in OP Surgery Spend

Compared to control group

Member Outcomes

DPC patients are more satisfied and engaged with primary care, and experience better health outcomes.

85% Engagement Rate

DPC patients with a PCP visit over 12 months (96.7% for patients with at least 1 chronic condition!)

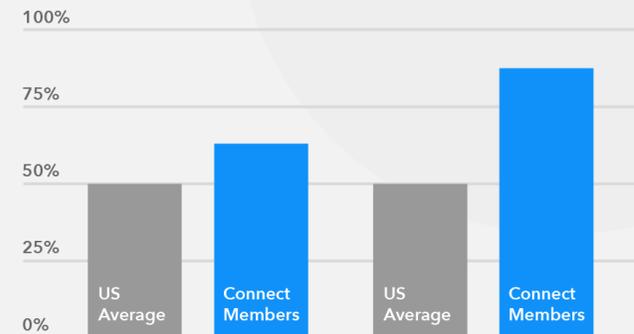
2.8X More Engaged

70+ Net Promoter Score

Patients actually love their healthcare

~2X As Likely

To have chronic diseases under control



Patients with Hypertension with BP <130/80 mmHg

Patients with Diabetes with HBA1c < 9

Hint Connect Overview

Bywater is partners with Hint Connect to make DPC available to our self-funded clients

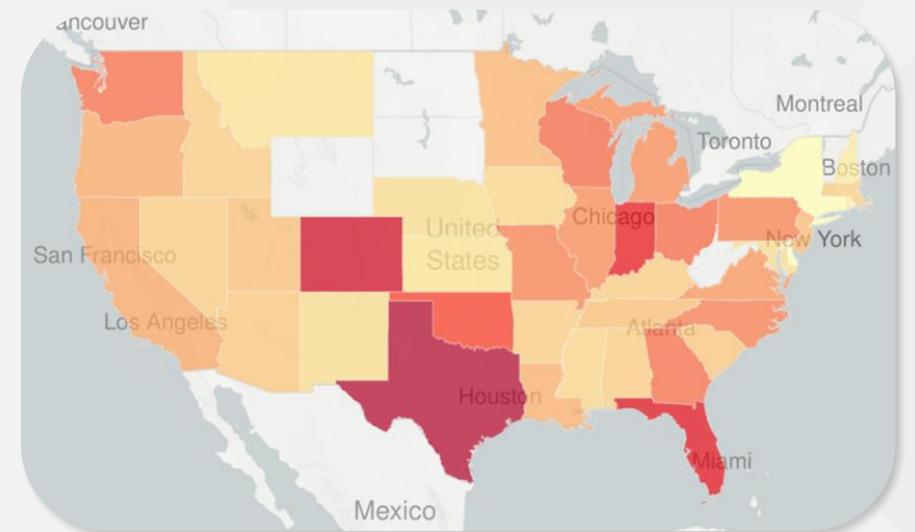
Care Model

- DPC clinicians provide all-access, proactive primary care and charge on flat monthly fee for participating members

Value Add

- Single entry point for employer and multiple DPC providers
- DPC practices vetted to provide high quality patient care

43 States and 650 DPC providers





Q&A



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