MOBĒ®

Health plan saves millions over three years and proves attribution with trial.

Client:

Not-for-profit, regional, mid-sized health plan

SIZE CATEGORY: 200K+ members, including fully-insured commercial and individual
SELECTED FOR MOBĒ®: 25–50K members
RANDOMIZED CONTROLLED TRIAL (RCT): Members assigned to performance and control groups

Key Takeaway:

A randomized controlled trial (RCT) eliminated any question of attribution and proved so convincing that a health plan doubled their members for the program.

Members in the performance group engaged effectively and achieved significant health improvements, reducing utilization and cost. The outcome? The plan saved $13.2M in the first two periods and $19.1M in the most recent year, totaling over $32M in savings.

Over Three Performance Periods:

Claims-cost savings:
5.6%
vs. projected spend

Engagement rate:
32.4%

Challenges:

Like most, this health plan faced rising costs, and its organizational cost-of-care leader needed to accomplish measurable savings goals quickly while confidently demonstrating program attribution for skeptical stakeholders. Its patient-centered care resources were constrained to the highest-cost and highest-risk members, and its engagement efforts were narrowly focused, which limited its ability to maximize reductions in the total cost of care—especially with any speed.

Solution:

Partnering with MOBE addressed two critical challenges for the plan: program attribution and rising costs. MOBE's gold-standard RCT methodology and guaranteed cost-savings model eliminated risk, allowing the plan to count on savings up front.

Using proprietary AI analytics, MOBE identified a rising-risk, multi-chronic population, mid-tier claimants caught in a cycle of system overutilization. These members were split into two groups: one receiving MOBE's personalized guidance and medication optimization, and a control group. Both had access to the same plan benefits, subject to the same system changes, with MOBE as the only difference.

The first performance period delivered such strong outcomes that 10,000 members were added to the performance group, eligible for MOBE. The result? 32.4% engagement and significant savings across three years.

MOBE's whole-person, cross-condition solution complemented the plan's existing offerings without competition or redundancy by focusing on a unique subset of continual care seekers—those representing untapped savings.

Milliman — Read Milliman's report validating MOBE's methodology for measuring claims cost savings with RCT.

> "For me to deal with a Doctor of Pharmacy, for her to give me information on each of our phone calls—I felt much, much better able to advocate for myself with my MD. I was able to get off some of my meds, too."
>
> **Sarah**
> health plan member
> MOBE participant

Year-Over-Year Results:

The health plan realized three consecutive performance periods of increasingly positive population health outcomes and claims-cost savings.

97% participant satisfaction rate

HEALTH OUTCOMES – Driven and maintained by one-to-one conversations with a MOBE Guide or Pharmacist and/or via app interactions.

UTILIZATION AND MED REDUCTIONS +

CLAIMS-COST SAVINGS across categories $

41% of participants had weight loss goals and lost at least 5% of their starting weight.

65% of participants who were sedentary increased their daily steps.

71% of participants who previously slept less than seven hours now regularly get 7–9 hours.

74% of participants improved their emotional health.

69% are managing stress better.

96% of recommendations made by MOBE Pharmacists were accepted by participants and providers.

12.8% fewer hospital admissions

11.1% fewer ER visits

27.5% fewer opioid prescription fills

14.2% saved—inpatient claims costs

$973 saved—per member on average in the most recent performance year

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MOBĒ®

Get the whole-person, cross-condition solution proven to reduce total cost of care.

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