



Health Cost IQ

Predict. Interpret. Act.

A Breakthrough in
Value for Your Clients

 **HEALTH DATA IQ**
A game changer for Brokers

A Breakthrough in Value for Your Clients

Benefit Advisors have a big challenge: how to differentiate themselves from the competition to retain existing clients and win new business. Other Benefit Advisors have access to many of the same products and services you do, including Third Party Administrators, Stop Loss Carriers, Pharmacy Management Companies, and Provider Networks.

With the insightful reporting from the Health Data IQ platform, you gain a new advantage: an advanced solution that dramatically improves your ability to serve as a true “trusted advisor.” And your clients gain easy access to actionable insights to achieve some of these critical goals:

- Improve the health of employees and families
- Build productivity and morale
- Dramatically boost their bottom line

The Health Data IQ platform can answer some of the following questions from your clients:

- Who are our company’s riskiest members and what are they costing us?
- Can we monitor cost and utilization over time?
- Which members are using the ED and Urgent Care for primary care?
- How do we accurately identify and intervene in high risk cases before they become high cost cases?



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Increase your Health Data IQ with a Few Clicks

“3% – 5% of your population are responsible for 40% – 50% of your total healthcare spend.”

Analysis paralysis is a common symptom of data overload. It's not that many folks don't know what they are looking for. The problem is that it takes a lot of time, too many steps and too many clicks to get to the data they need, and then many more hours to make sense of the data once they find it.

HCQ simplifies that process by performing advanced risk stratification and predictive modeling processes on your data and presenting the results to you in a clean, easy to use interface, enabling you to get the information you need quickly, so you can spend your time on doing your work and making important decisions.

Our 3-step PIA process ensures you have the tools you need to succeed:

- Step 1: **Predict** health cost, disease burden, and future risk for your groups
- Step 2: **Interpret** the results of our risk stratification and predictive modeling
- Step 3: **Act** quickly and intervene preemptively to lower risk and reduce cost

Below are some use cases from the Health Data IQ platform

Who are our riskiest members and how much are they costing cost us?

Our Utilization and Cost IQ module deploys sophisticated statistical modeling, based on the Johns Hopkins ACG® System and our proprietary DataIQ predictive model to forecast future costs across multiple risk categories, up to 12 months into the future. Individual members as well as disease clusters and employer groups are risk-adjusted and stratified into one of 5 high-level risk groupings, providing meaningful insights into the pattern and flow of cost and utilization across populations and employer groups.

What chronic conditions are most prevalent in our population and where geographically are they most prevalent?

Our Disease Conditions IQ module displays disease prevalence in the whole population, with the ability to drill down to entire chronic conditions, employer groups, and individual clinical profiles depending on the role of the user. Drill down to individual ZIP codes or cities is also available for policy makers.

Can we track and measure what's happening over time?

The powerful Risk Trending IQ module provides ongoing tracking of changes in the health status of members and risk profiles of employer groups as well as monitors new and potentially costly medical conditions that are occurring within the population. This module chronologically and graphically highlights trends along with all associated costs to aid in the detection and aversion of negative clinical and cost trends.



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