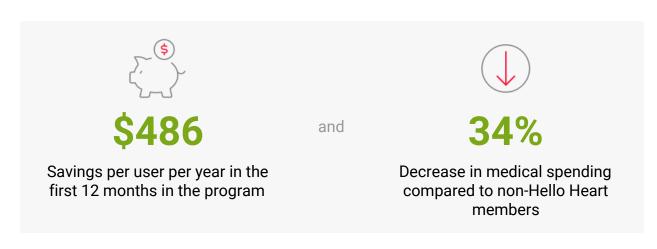
evive



Evive cost savings research: Hello Heart reduces cardiovascular medical claims by 34% and produces strong ROI within 1 year

The introduction of Hello Heart saved a large, self-insured employer \$486 per Hello Heart participant per year on cardiovascular medical claims, compared to members not enrolled in Hello Heart during the same time period.

Using Hello Heart produced a clear, meaningful financial impact in members enrolled in the program:



Our Mission:

At Hello Heart, our mission is to empower people to understand and improve their health using smartphone technology.

We focus on the largest problem in healthcare: heart health. It's the number one cause of death in the world.¹ Heart disease was reported to cause 1 out of 5 deaths in the United States²; this has increased to 1 out of 4 deaths in the past decade.² 42% of Americans and 35% of the employer covered population have high blood pressure (hypertension).³ Collectively, heart disease and hypertension are the biggest factors in healthcare costs, responsible for over \$300 billion dollars a year⁴ or almost a billion dollars a day.

Intensive BP control significantly reduces the risk of mild cognitive impairment. Every 10 mmHg reduction in systolic blood pressure significantly reduces the risk of major cardiovascular disease events, coronary heart disease, stroke, and heart failure, leading to a significant 13% reduction in all-cause mortality. Pharmacologic interventions that lower BP lower the risk of cardiovascular disease. 45

Masked hypertension occurs when individuals with office-based BP <130/80 mmHg have elevated ambulatory BP ≥130/80.6 It is estimated that 12.3% of adults and 28% of persons older than 65 years have masked hypertension.⁷ Masked hypertension is more prevalent in men and African Americans, increases with age, and may be accompanied by diabetes.^{8 9 10} Home blood pressure monitoring may predict patient outcomes,¹¹ and the U.S. Preventive Services Task Force (USPSTF) recommends obtaining measurements outside of the clinical setting for diagnostic confirmation of high BP before starting treatment.¹²

Medical Claims Analysis Methodology:

Hello Heart partnered with Evive, a technology platform that provides data-driven experiences for better benefits engagement. Together, they conducted an analysis of medical claims data, evaluating a subset of cardiovascular-related ICD-10 codes from a large, self-insured employer. Medical claims data from 217 registered Hello Heart users was obtained, and an analysis was conducted comparing the 12 months leading up to the registration of the member in Hello Heart to the 12 months after the member was enrolled in Hello Heart.

To assess the impact of the Hello Heart program while accounting for overall cost trend, an analysis of medical claims data for matched members who did not use Hello Heart for the time period before and after the program was performed. Both the Hello

Heart group and the control group had one or more hypertension related ICD-10 claims in the 12 months prior to the intervention period.

Background

One of the largest retailers in the US had a goal: to reduce costs associated with cardiovascular disease. After a rigorous review process, they chose Hello Heart's program as their solution.

Their decision: to address this issue by putting cutting-edge technology in the hands of their employees who had been diagnosed with hypertension, empowering them to understand and improve their heart health.

They chose Hello Heart because it's the only smartphone solution with a peer-reviewed, published clinical study on hypertension. And, it has the best clinical outcomes.

Hello Heart Solution

Hello Heart's flagship solution is a hypertension self-management program. It incorporates an FDA-approved Bluetooth-enabled blood pressure monitor paired with a smartphone app. Users can track their blood pressure, weight, and physical activity on their smartphone. The software incorporates medication adherence reminders and clinically-based digital coaching to drive lifestyle changes. Hello Heart's program drives meaningful clinical outcomes that are 2x greater than any other solution on the market.



Results

Member Enrollment Success

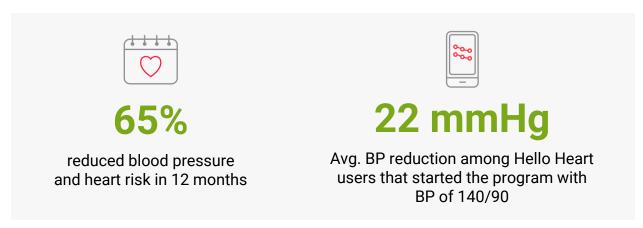
Leveraging the robust data set and personalized messaging capabilities of Evive's platform, targeted enrollment efforts were initiated. Members with elevated BP readings were offered the opportunity to participate in the Hello Heart program.

In widely distributed and geographically dispersed populations where remote enrollments are the norm, success rates of end-point solutions typically average 5%-10%. The combination of pinpoint, targeted messaging, and Hello Heart's 100%

mobile enrollment process yielded a success rate of 28% - **tripling the expected** enrollment rate.

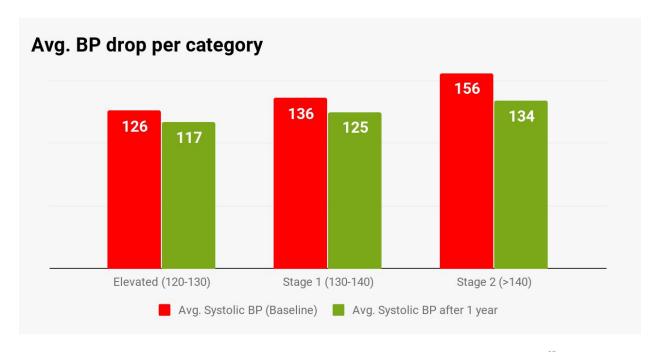
Clinical Impact of Hello Heart

Members who used Hello Heart demonstrated meaningful clinical improvements.



Source: Hello Heart Clinical Outcomes 13

65% of users demonstrated a reduction in blood pressure readings during the year. The reduction of blood pressure was measured by the average first week's blood pressure reading vs. the last week of that time period. The majority of users who started the program were in hypertension stage 2 (140/90), and these users reduced their systolic BP 22 mmHg on average in 12 months. These results are significant because a ten-point decrease in blood pressure cuts the risk of heart attack in half.



Source: Large Retailer Blood Pressure Readings Data: 2018-2019; analysis conducted by Hello Heart¹³

Evive conducted its own validation of the clinical data, comparing biometric screening data captured by an independent, third-party screening provider, and found that Hello Heart users had a drop of 24 mmHg systolic BP year over year.¹⁴

Source: Evive validation of Clinical Outcomes¹⁴

According to the American Heart Association, a "hypertensive (high blood pressure) crisis is when blood pressure rises quickly and severely with readings of 180/120 or greater." Consequences of a hypertensive crisis can include stroke, heart attack, heart failure, loss of consciousness, and damage to the eyes and kidneys.

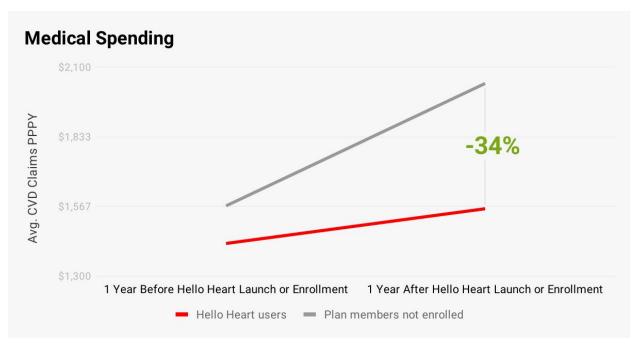
Financial Impact of Hello Heart

In the first year, real-world data on Hello Heart users showed a 34% reduction in cardiovascular claims, which represented a Year-1 positive ROI of 2X against the program investment and average cost savings of \$486 per user through improved clinical outcomes and timely identification of hypertensive crisis. Employer data showed much lower \$\$ spending on cardiovascular disease compared with market standards, which means that Hello Heart's 34% reduction in annual healthcare costs per user represents a significant dollar amount for employers.



Source: Medical Claims Analysis conducted by Evive¹⁵

When comparing the medical costs incurred by Hello Heart users versus those with high BP not participating in the program, a 34% reduction in medical costs year-over-year was seen.



Source: Medical Claims Analysis conducted by Evive¹⁵

References

- ¹ Lim SS, Vos T, Flaxman AD, et al. A comparative risk assessment of burden of disease and injury attributable to 67 risk factors and risk factor clusters in 21 regions, 1990-2010: a systematic analysis for the Global Burden of Disease Study 2010. Lancet. 2012 Dec 15;380(9859):2224-60
- ² Danaei G, Ding EL, Mozaffarian D, et al. The preventable causes of death in the United States: comparative risk assessment of dietary, lifestyle, and metabolic risk factors. PLoS Med. 2009 Apr 28;6(4):e1000058.
- ³ Williamson JD, Pajewski NM, Auchus AP, et al., SPRINT MIND Investigators for the SPRINT Research Group. Effect of Intensive vs. Standard Blood Pressure Control on Probable Dementia: A Randomized Clinical Trial. JAMA. 2019 Feb 12;321(6):553-561.
- ⁴ Law MR, Morris JK, Wald NJ. Use of blood pressure lowering drugs in the prevention of cardiovascular disease: meta-analysis of 147 randomised trials in the context of expectations from prospective epidemiological studies. BMJ. 2009 May 19;338:b1665
- ⁵ Ettehad D, Emdin CA, Kiran A, et al. Blood pressure lowering for prevention of cardiovascular disease and death: a systematic review and meta-analysis. Lancet. 2016 Mar 5;387(10022):957-967.
- ⁶ Whelton PK, Carey RM, Aronow WS, et al. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/ APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. J Am Coll Cardiol. 2018 May 15;71(19):e127-e248.

- ⁷ Wang YC, Shimbo D, Muntner P, et al. Prevalence of Masked Hypertension among US Adults with Nonelevated Clinic Blood Pressure. Am J Epidemiol. 2017 Feb 1;185(3):194-202.
- ⁸ Tientcheu D, Ayers C, Das SR, et al. Target Organ Complications and Cardiovascular Events Associated With Masked Hypertension and White-Coat Hypertension: Analysis From the Dallas Heart Study. J Am Coll Cardiol. 2015 Nov 17;66(20):2159-2169
- ⁹ Banegas JR, de la Cruz JJ, Graciani A, et al. Impact of Ambulatory Blood Pressure Monitoring on Reclassification of Hypertension Prevalence and Control in Older People in Spain. J Clin Hypertens (Greenwich). 2015 Jun;17(6):453-61.
- ¹⁰ Cuspidi C, Rescaldani M, Tadic M, Sala C, Grassi G, Mancia G. White-coat hypertension, as defined by ambulatory blood pressure monitoring, and subclinical cardiac organ damage: a meta-analysis. J Hypertens. 2015 Jan;33(1):24-32.
- ¹¹ Piper MA, Evans CV, Burda BU, et al. Screening for High Blood Pressure in Adults: A Systematic Evidence Review for the U.S. Preventive Services Task Force. Evidence Synthesis No. 121. AHRQ Publication No. 13-05194-EF-1. Rockville, MD: Agency for Healthcare Research and Quality; 2014
- ¹² Siu AL; U.S. Preventive Services Task Force. Screening for high blood pressure in adults: U.S. Preventive Services Task Force recommendation statement. Ann Intern Med. 2015 Nov 17;163 (10):778-86.
- ¹³ Large Retailer Blood Pressure Readings Data: 2018-2019; analysis conducted by Hello Heart
- ¹⁴ Large Retailer Blood Pressure Readings Data: 2018-2019; analysis conducted by Evive using 3rd party screening partner data
- $^{\rm 15}$ Large Retailer Medical Claims Data: 2018-2019; analysis conducted by Evive



About Hello Heart

Why most F500 employers choose Hello Heart for their employees:

Clinically validated – Hello Heart is the only smartphone solution with a peer-reviewed published clinical study on hypertension. In a retrospective peer-reviewed study, 69% of users reduced their blood pressure. The average decrease of systolic blood pressure was 22 mmHg, two times the reduction of the industry standard.

Easy to use – Hello Heart has above market-average enrollment and engagement rates demonstrating an average 45% enrollment success of those clinically eligible and +70% of participants in the program are engaged 12 months into the program.

Best in Consumer Grade Technology – Hello Heart uses BLE technology, leveraging the most advanced, reliable and secure connection to transfer data from monitors. It transmits readings without the need for cellular reception - anytime, anywhere.

Visit www.helloheart.com to learn more.

evive

About Evive

Evive changes how people use benefits. Powered by big data and little nudges, Evive seamlessly integrates benefits into the lives of more than 4 million people every day. The company's EviveOS™ platform provides data-driven experiences that guide people to better health, wealth, and work/life success, while helping Fortune 500 enterprises optimize their investments in people. With large employers and their employees, we're on a journey toward benefits love. Visit goevive.com to learn more.