

Heart Failure Management

EXECUTIVE SUMMARY

Left untreated, heart failure poses a significant economic burden to society, the health care system and employers. This accounts for an estimated \$34.8 billion in direct and indirect costs annually.¹

Medica helps protect you and your employees from the risks of heart failure. We provide a comprehensive program designed to prevent the serious complications and related health problems that can occur with the disease. Our success at enrolling members living with heart failure and providing them with effective disease management results in improved quality of life and decreased health care costs.

KEY RESULTS[†]

- Savings of more than \$5,000 a year per program participant in annual health care expenditures²
- A return on investment of up to \$6.40 for every dollar spent²
- 70% of surveyed members report improved or stabilized emotional and physical health status³

THE IMPACT OF HEART FAILURE

Heart failure develops when the heart muscle isn't working as well as it should and can't pump as much blood as the body needs. The body tries to make up for it by retaining salt and water to increase the amount of blood in the body. The heart also beats faster and gets bigger. Over time, though, the heart gets worn out and fluid starts to build up in the body, causing symptoms like weakness and feeling out of breath.

Prevalence

- Nearly 5 million Americans have heart failure and 550,000 new cases are diagnosed each year⁴
- 75% of heart failure patients also have hypertension; 68% also have coronary artery disease (CAD)⁵; 26% also have diabetes⁶
- About 22% of men and 46% of women who have had a myocardial infarction will be disabled with heart failure within 6 years; 1 of 5 women die within a year of developing heart failure¹

Costs

- Hospital discharges for heart failure rose from 377,000 in 1979 to 995,000 in 2001, an increase of 164%¹
- Heart failure is the underlying reason for 12 to 15 million office visits and 6.5 million hospital days each year⁴

Productivity Implications

- In 2004, heart failure cost the nation an estimated \$2.1 billion in lost productivity due to mortality¹
- Readmission shortly after hospital discharge remains disturbingly common, and most patients continue to experience limiting symptoms and poor quality of life despite treatment.⁷ This can be dramatically reduced with good management, including both patient self-management and tight medication control supervised by the physician.

THE MEDICA SOLUTION

Medica provides a comprehensive disease management program designed to detect, prevent and lessen the severity of heart failure for eligible members.

Program participants receive education, individual counseling and support from nurses or clinical specialists to help them manage their symptoms and make healthy lifestyle choices. For example, encouraging proper therapy and use of beta blockers and ACE/ARB medications reduces the risk of heart failure episodes, reduces hospitalization and prolongs life.

Program goals include:

- Slowing the progression of the disease
- Prolonging healthy periods
- Reducing emergency room visits and hospital admissions
- Improving outcomes

Participants are encouraged to play a central role in managing their own care, a strategy shown to improve both member health and program satisfaction.

MEDICA OUTCOMES[†]

Financial

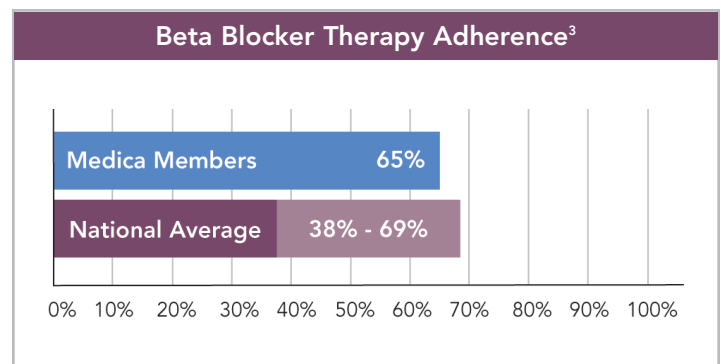
- \$5,257 annual savings per program participant in total health care expenditures²
- 17.6% reduction in emergency room visits²
- 27.7% reduction in inpatient hospital admissions²
- Up to 6.4 return-on-investment (ROI)²

Clinical

- 65% adherence to beta blocker therapy, compared to a 38%-69% national benchmark cited in recent health services research³

Participant Experience

- 70% of surveyed participants report improved or stabilized emotional and physical health status³



NEXT STEPS

Clinical trials have shown that disease management programs can reduce hospitalization frequency and improve quality of life and functional status for members with heart failure, particularly for those at high risk for clinical deterioration or hospitalization.⁴ To learn more about how Medica's health management programs can make a difference for you and your employees, please contact your broker or Medica representative.

We are taking direct action with our network to improve performance on ACE inhibitors.

Any reference to material developed by companies other than Medica does not imply endorsement of Medica's program.

¹ Heart Disease and Stroke Statistics -- 2008 Update, American Heart Association.

² Medica's Disease Management Performance Review. Conducted in conjunction with Reden and Anders on Pre Study Period of 5/1/2002-4/30/2003 and Post Study Period of 5/1/2003-4/30/2004. Adjusted with current fees.

³ Medica's Disease Management program results. Commercial Fully and Self-Insured Outcomes Report. Period ending June 2007.

⁴ Hunt SA, Baker DW, et al. ACC/AHA guidelines for the evaluation and management of chronic heart failure in the adult: executive summary: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines. J Am Coll Cardio. 2001.

⁵ American College of Cardiology/American Heart Association. Guidelines for the evaluation and management of chronic heart failure in the adult. 2002.

⁶ CA Polanczyk, LEP Rohed, et al. "Ten-year trends in hospital care for congestive heart failure." Archives of Internal Medicine. 2000.

⁷ Heart Failure Society of America. HFSA Guidelines for Management of Patients With Heart Failure Caused by Left Ventricular Systolic Dysfunction – Pharmacological Approaches. Journal of Cardiac Failure. 1999; 5: 357-382.

[†]The outcomes information is provided for your information only, and is based upon aggregate data, rather than group specific data. It illustrates the potential results associated with purchasing certain disease management programs. No outcome guarantees are made as a result of providing this information.