

PILOT STUDY

The purpose of the collaborative pilot study by Blue Cross, Sheridan Medical Group and the PT/MOG was to determine if a supervised medical fitness program delivered in fitness facility that is integrated within a Physical Therapy Practice and fitness focused medical visits by the Primary Care Physician will have a positive impact on the cost of health care for the participating patients. Participants were defined, by Blue Cross, to be a group of patients with multiple co-morbidities and moderate to high yearly health care costs (high risk/high cost).

Medical and Fitness testing was performed quarterly with a resulting analysis of changes performed after 1 year of participation. Additionally Blue Cross Blue Shield analyzed the predicated cost of health care for the 12 month period against the actual cost of care for each participant during that 12 month period.

The analysis of the 102 participants was completed for both medical metrics and the total cost of health care. BCBS found that participants in a MOG fitness program had statistically significant improvement for BMI, weight, body fat, Sub VO2, MOG fitness score, and FEV1; they were all significant at the .05 level. Additionally it was found that there was a total cost of care decrease that averaged \$4,000 per participant. These participating patients demonstrated a 28% decrease in their total cost of care for the 12 months of participation. Additionally there was a 20% migration of patients from a high risk pool to a lower risk pool.

\$4000↓

Average reduction in total cost of care per participant

20%

Migration from a high risk to a lower risk pool

3:1

RETURN ON INVESTMENT

In a 1 year collaborative study, Harvard Pilgrim Health, a multispecialty medical group, and the MOG placed 66 patients diagnosed with pre-diabetes into a MOG program and after 1 year none of these 66 patients became diabetics. Research suggests 1/3 of pre diabetics become diabetics, 1/3 would remain pre-diabetics and 1/3 will have no diabetic diagnosis. Diabetic patients have on average \$10,000 of healthcare costs above non- diabetics. This study has significant implications for downstream cost of care savings.