



ValidationInstitute

Final Report for: **US HealthCenter, Inc.**

2022

Validation

Report

Validation Achieved: Level 3 – Validated for Metrics

Valid through: March 2023



Company Profile

Category:	Population Health Management
Website:	https://www.ushealthcenterinc.com/
Public or Private:	Private
Year Established:	2010
CEO:	Mr. Gavin Quinnies
Company Contact:	gquinnies@ushcinc.com
Description:	

US HealthCenter's proprietary Population Management system named PredictiMed™ AI includes an AI based health risk assessment (HRA) that digests such data as DNA, biometrics, medical and pharmacy claims, demographic, wearable and other data. The HRA output predicts the likelihood of the onset of over 40 conditions within the next 3 years, and then provides customized interventions via a user interface name the Personal Health Dashboard.

The interventions apply evidence-based tactics to prevent the onset of disease, reduce complications of current disease, and promote primary prevention. The goal is for people at low-risk to remain low-risk, and for people at moderate- or high-risk to shift to lower-risk levels.

In 2015 the Institute validated PredictiMed™ AI's ability to identify and lower the pre disease and high risk level for 13 conditions, which may lead to 80 to 93% higher use of ER and hospital services. This validated HRA is used to



Company Profile

determine those adults at disease risk. The output of this risk model also calculates potential medical claims cost, or Risk Burden, of the population.



Claim Assertion for Validation

The US HealthCenter calculator uses valid estimates of the disease incidence and cost (Risk Burden) of 12 illnesses. In a study of 8373 participants representing 7 distinct US regions and 10 industries, the average Risk Burden was \$9550 per participant. According to research published by the Kaiser Family Foundation in 2019, the average cost of employer-sponsored health insurance for annual premiums was \$7,188 for single coverage and \$20,576 for family coverage. The report also found that the average annual deductible amount for single coverage was \$1,655 for covered workers. The combination of the \$7188 single premium and \$1655 deductible totaling \$8843 represents an average amount of annual expected healthcare spend for a single adult (Risk Burden). The US HealthCenter Risk Burden average of \$9550 is within 8% of the KFF average spend per US adult.

The 12 illnesses are the focus of USHC's risk reduction programs, whose goal is to improve health status and reduce health plan expenses. The calculator gives population health managers a reasonable estimate of the medical costs that the risk reduction program could impact.

Using the validated HRA to predict the quantity of those at disease risk in conjunction with the estimated cost of risk ("Risk Burden"), a group can identify the opportunity for preventing disease and lowering risk.

The calculator gives population health professionals a tool to not only measure current Risk Burden by condition and in total, but also compare trends.



Method / Calculation / Examples

The 12 illnesses are listed in Table 1.

For each illness, one or more sources of the incidence of the illness and/or frequency of care seeking was gathered. For example, between 12 and 14 percent of U.S. adults seek care for back pain each year. The calculator averages the data sources' estimates of risk burden incidence.

The added (or incremental) cost of each illness was gathered from one or more sources. The calculator uses the average cost estimate. A risk reduction program can have an impact on the costs directly related to the illness but cannot eliminate all of a person's medical costs.

Back Condition		
Coronary Heart Disease		
Depression/Anxiety		
Diabetes II		
Hypertension		
Peripheral Artery Disease		
Stroke		
Breast Cancer		
Colorectal Cancer		
Lung Cancer		
Prostate Cancer		

Table 1: Diseases the HRA can predict the Incidence and Estimated Risk Burden Average Incremental Cost of Target Illnesses

The calculator tool predicts the amount of financial risk burden by using the number of adults at risk for a condition or conditions and the average cost of that condition. In this way a total risk burden of those at risk using the validated HRA and the average cost of an episode of care can be estimated.



Findings & Validation

This gives the population health manager a method of calculating the incidence rate by the employer's number of adults at disease risk to get an estimated number of people at risk for the condition with the target illness and the associated cost, or risk burden. The number of adults is then multiplied by the



Limitations



Validation and Credibility Guarantee

US HealthCenter's Calculator achieved Level 3 validation for Metrics. Validation Institute is willing to provide up to a \$25,000 guarantee as part of their Credibility Guarantee Program. To learn more, visit <https://validationinstitute.com/credibility-guarantee/>.

Level 1 – Savings

Can reduce health care spending per case/participant or for the plan/purchaser overall.

Level 2 – Outcomes

Product/solution has measurably on an outcome (risk, hba1c, events, employee retention, etc.) of importance.

Level 3 – Metrics

Credible sources and valid assumptions create a reasonable estimate of a program's impact.

Level 4 - Contractual Integrity

Vendor is willing to put a part of their fees "at risk" as a guarantee.

Validation Expiration

CERTIFICATE OF VALIDATION

Applicant: **US HealthCenter Inc.**
250 S Main Street, Suite 201, Thiensville,
Wisconsin 53092, US

Product: US HealthCenter Calculator

Claim: The US HealthCenter calculator gives employers a reasonable estimate of the medical costs that the risk reduction program could impact.

Validation Achieved: **Level 3 – validation for Metrics**

Validation Award Date: **February 2022**

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Validation Institute

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About Validation Institute

Validation Institute is a professional community that advocates for organizations and approaches that deliver better health value - stronger health outcomes at lower cost. We connect, train, and certify health care purchasers, and we validate and connect providers delivering superior results. Founded in 2014, the mission of the organization has consistently been to help provide transparency to buyers of health care.

Validation Review Process

Validation Institute has a team of epidemiologists and statisticians who review each program. The team focuses on three components:

- Evidence from published literature that a similar intervention had similar results.
- The reliability and credibility of the data sources.
- The rigor of the approach to calculating results.

To achieve validation, the program has to satisfy each of these components. VI's team then summarizes the review into a report which is publicly available. Details of VI's review are available with the program's permission.