# Managing Chronic Conditions using Big Data

A SCALABLE HEALTH WHITEPAPER



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# Five Chronic Conditions Account for 75% of Healthcare Spending

According to the CDC - chronic health problems such as cardiovascular disease, diabetes, obesity, cancer and kidney disease account for more than 75 percent of the nation's \$2.7 trillion annual healthcare spending.

#### The Cost of Chronic Care

**Cancer -** The American Cancer Society estimates that the direct medical costs (total of all health care costs) for cancer in the US in 2014 were \$87.7 billion. 58% of this cost is for hospital outpatient or doctor's office visits, and 27% is for inpatient hospital stays.

**Cardiova scular Disease** - The American Heart Association projects that the annual cost of treating cardiova scular disease will triple between 2010 and 2030, from \$273 billion to \$818 billion.

**Dia betes** - The American Dia betes Association estimates that costs associated with diagnosed diabetes have risen 41 percent, from \$174 billion in 2007 to \$245 billion in 2012.

**Obesity -** The CDC now counts 1 in 3 adults and nearly 1 in 5 youths from ages 6 to 19 as obese. The cost of treating medical problems related to obesity reached an estimated \$147 billion in 2008, and individual medical costs for obese patients were \$1,429 higher in 2006 than those for people of healthy weight.

**Kidney Disease** – The National Kidney Disease Education Program estimates chronic kidney disease costs \$57.5 billion in the U.S. annually. The end-stage renal disease costs \$39.5 billion. Major risk factors include diabetes, high blood pressure, and family history.

#### The Power of Prevention

Although chronic diseases are among the most common and costly of all health problems, they are also among the most preventable.

Chronic disease prevention, to be most effective, must identify those either at high risk or whose lifestyle puts them at risk and offer intervention as early as possible. Intervention and prevention encompass promoting healthy activities that encourage wellness and limit the potential for the initial onset of chronic diseases.

Poor lifestyle choices, such as smoking, overuse of alcohol, poor diet, lack of physical activity, and inadequate relief of chronic stress are key contributors to the development and progression of preventable chronic diseases, including obesity, type 2 diabetes mellitus, hypertension, cardiovascular disease and several types of cancer. Most patients understand the need for better lifestyle choices but may not be able to implement or sustain changes long enough to benefit from improved wellness. Short-term changes can be achieved, but long-term changes to diet and exercise habits are very hard to maintain, thus constant support and intervention are needed to sustain long-term behavioral changes.

Appropriate interventions, which include nutritional counseling, exercise training, and stress management techniques, can dramatically improve outcomes for patients at risk and those who already have common chronic diseases. Medical studies show that adults with common chronic conditions who participate in comprehensive lifestyle modification programs experience rapid, significant, clinically meaningful, and sustainable improvements in biometric, laboratory, and psychosocial outcomes.

# Costs of Chronic Disease



Chronic diseases account for of every spend on Healthcare or \$7,900 For every American with a chronic disease



Since they are frequently longstanding, people with chronic conditions are also at high risk for depression, anxiety, marital and family discord and financial burden.



About 25% of people with a chronic disease have some type of activity restriction. e.g. Mobility, Personal Care, Work or Schooling.

Even with health insurance. Chronic conditions can pose a significant financial burden, Particularly when work is affected. People with chronic diseases are at highest risk of medical errors and Duplicated or unneeded services.

Most Disability and premature deaths in U.S. are caused by chronic diseases Such as diabetes, cancer and heart disease.



Medical expenses are the #1 cause of bankruptcy in the U.S.

1 in 3 children born today will Develop diabetes in their lifetime (1 in 2 Latino children).

Healthcare costs for a person with one or more chronic conditions are **FIVE TIMES HIGHER** Compared to individuals without a chronic disease.

Obesity in adults has doubled in the last 20 years, tripled in children ages 2-11, and **MORE THAN TRIPLED** in children ages 12-19



Overweight and obesity are the biggest public health threats of this century, causing Unprecedented Increases in the rates of diabetes, heart disease, osteoarthritis, among others.

The CDC estimates that an investment of \$10 per person per year in community-based programs tackling physical inactivity, poor nutrition, and smoking could yield more than \$16 billion in medical cost savings annually within 5 years.

Prevention also embraces early detection efforts, such as screening at-risk populations, as well as strategies for appropriate management of existing diseases and related complications.

Early detection of disease and scheduling of screening examinations – The earlier detection of a disease may lead to more cures or longer survival. Special examinations exist for many chronic diseases, which can diagnose the disease while it is asymptomatic, with no signs or symptoms. However, because of the improved outcomes resulting from early interventions, many public health programs recommend at-risk patients have periodic screening examinations for detecting specific chronic diseases, for example, cancer, diabetes, cardiovascular disease, and so on.

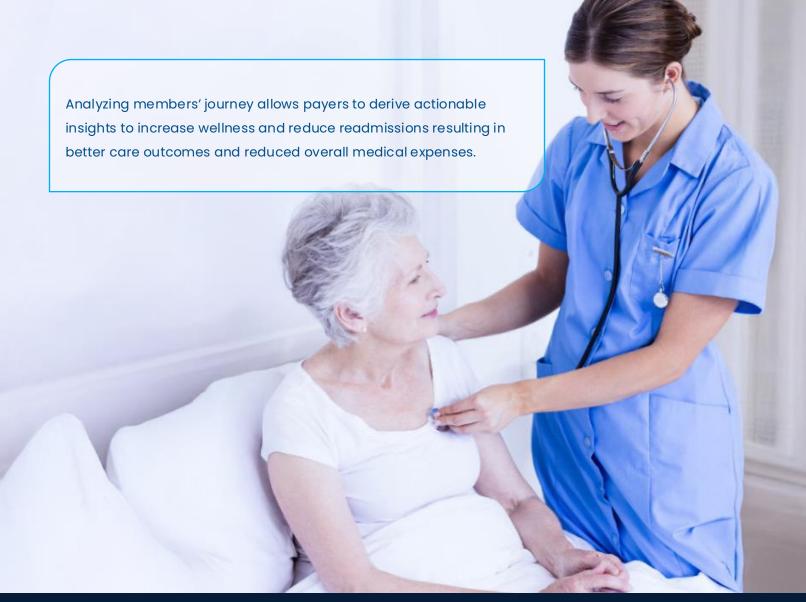
Chronic Disease Management – Patients who do not adhere to medical plans will have higher medical costs. It is estimated that if we looked at diabetes alone medication could save patients \$4.7 billion. If we look at the industry as a whole nonadherence can cost the healthcare system up to \$100 billion per year. Non-adherence has multiple causes including the complexity of the prescribed plan, a lack of communication between patient and provider, and socioeconomic barriers for patients. With a whole host of medical wearables, caregivers can closely monitor vitals to detect red flags and intervene before further disease progression occurs.

#### Making a Difference with Big Data

There are many potential use cases where big data analytics can potentially both improve the quality of care and reduce the costs associated with chronic conditions. For example –

Identify High-Risk Potentials - High-risk patients can be identified through data analytics offering an opportunity for preventative engagement. For example, 86 million adults aged 20 years and older have pre-diabetes. Results of a large U.S. nationwide study released in August 2001 showed that even if you are at risk of developing type-2 diabetes, you can reduce your risk by 58% through sustained modest weight loss and increased moderate-intensity physical activity, such as walking 30 minutes a day. Maintaining patient health and preventing disease progression offers payers considerable savings on healthcare costs.

Preventive Care - Stratifying the population, identifying patients at risk, analyzing gaps in care, and elevating pre-care planning are among the use cases in which advanced analytics can drive thoughtful and effective preventive care strategies. This strategy can potentially reduce the readmission by over 30%. To reduce chronic disease, Big Data offers healthcare providers actionable insights into high-risk patients offering the opportunity for intervention even when they are asymptomatic. It is essential to have a coordinated, strategic prevention approach, that promotes healthy behaviors, expands early detection and diagnosis of disease, supports people of every age, and promotes eliminates health disparities..



# A Value Based Care Approach to Chronic Disease Management

Value-based care rewards doctors and hospitals for keeping people healthy and effectively managing chronic conditions through evidence-based, cost-efficient methods. This is a departure from the traditional fee-forservice approach. With fee-for-service, doctors and hospitals are paid based on the number of healthcare services they deliver, such as tests and procedures. Payment generally has little to do with whether their patients' health improves.

Research has shown to improve healthcare outcomes for those with high-risk chronic conditions, healthcare providers must offer preventive care and disease management programs and other efforts to improve both care as well as quality and reduce the costs of conditions such as diabetes, asthma, hypertension, heart disease, and obesity.

#### **About Scalable Health**

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