

CASE STUDY

Wellth improved HbAlc levels in 80% of patients with uncontrolled Type 2 diabetes

: wellth





Better results for better health

67%

of all members showed improvement in Proportion of Days Covered (PDC) 86%

of previously non-adherent members showed improvement in PDC

94%

of members were adherent for the incentive duration

73%

of members remained adherent postincentive

HbA1c is a critical marker for people with or at risk for Type 2 diabetes. Taking prescribed diabetes medications consistently is a key method for lowering A1c and managing diabetes effectively. The trends in this pilot study demonstrate how increasing medication adherence correlates to lower HbA1c levels and improved diabetes control.

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The program was generous for paying patients to take better care of themselves. I often skipped my medication for the sake of convenience or laziness. This program kept me on my toes to the point where I didn't even need the reminder anymore.

- Member enrolled in Wellth

The Objective

Most diabetes medications have been shown to lower A1c by at least 0.5%—and in some cases, even more. However, people with diabetes cannot realize the positive effects of these therapies without taking them as prescribed.



Wellth is a patient-friendly app that uses principles of behavioral economics to build healthy long-lasting disease management habits. This pilot was created to evaluate how well Wellth could improve adherence to Type 2 diabetes medications and contribute to HbA1c lowering for members outside the continental U.S.

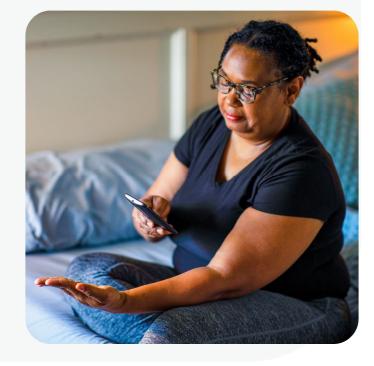
The Approach

Participants in this pilot were divided into two groups of 43 people each. For both groups, Wellth set up member specialist offices in Guam to provide enrollment support.

The study lasted a total of 270 days for Group 1. During the first 180 days, Group 1 participants were eligible for \$30 per 30-day period of medication adherence. There was no incentive for the last 90 days of the study.

Group 2's study period lasted for a total of 180 days; however, the incentive structure remained the same as Group 1's. Participants in Group 2 would receive \$30 per 30-day period of medication adherence during the first 90 days. No incentives were offered during the last 90 days.

During the incentive period, participants in both groups tracked their medication tasks through the Wellth app. These participants received daily reminders and were required to verify their medication-taking by uploading to the Wellth app a photo of the pill in their hand. Members who missed their check-in would lose \$2 of incentive money each day they missed a check-in.



The Findings

Improved HbA1c levels

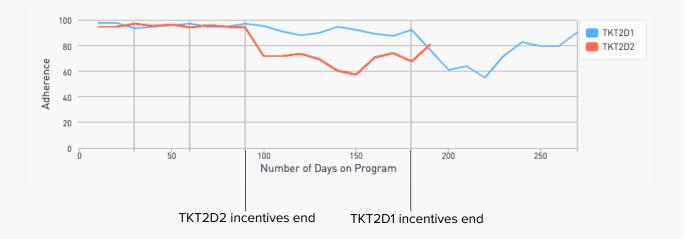
Of participants with uncontrolled diabetes, 80% saw improvement in HbA1c levels. In addition, for patients with an HbA1c rate over 8.0 improved their prescription frequency.

> 67% of participants showed PDC improvement

As prescription frequency improved, so did PDC and adherence to prescribed diabetes medications. During the incentive period, 67% of all participants showed PDC improvement. Even more substantially, PDC improved for 86% of previously non-adherent participants.

> 90 % of participants showed continued adherence post-incentive stage

While the adherence rates did drop slightly, 90% of participants maintained high adherence to prescribed guidelines once the incentive stage was over. When the program began, the average PDC was 49%. During the incentive period, PDC rose to 84%, and after the incentive program, PDC leveled out at 75%.



> 83 Net Promoter Score

Measured on a scale from -100 to 100, a positive Net Promoter Score (NPS) is above 0. For healthcare, the average NPS is 27. Survey was conducted to the participants and the NPS was +83 which showed their high degree of satisfaction.

Outcomes from this study show remarkable promise for people with Type 2 diabetes.

These results also help demonstrate the longevity of Wellth's behavioral economics-based approach. Overcoming barriers to establishing healthy habits gives Wellth members the confidence boost they need to continue health disease management habits over time.

The Takeaway

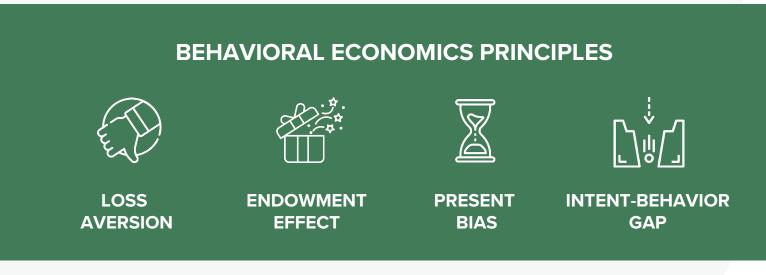
Wellth's behavioral economics approach not only spurs lasting change but does so in populations where other adherence-promoting activities that may have been attempted were ineffective.

The Science Behind the Success

If we fail to grasp why someone isn't prioritizing their health, we can't change their unique set of circumstances.

We use the science of behavioral economics combined with an appreciation for human nature.

This enables us to uncover and address the unique obstacles that prevent people from forming the habits necessary to create lasting behavior change.



Wellth is built on a foundation of empathy, using tools and techniques that meet people where they are to build healthy habits that last a lifetime. We leverage the behavioral economics principles of **Loss Aversion, Present Bias, the Endowment Effect and the Intent-behavior Gap.** These principles allow us to respond to how people actually behave—rather than how we believe they should behave. It also allows us to personalize each incentive plan to each individual member.

About Wellth

Wellth is a care plan adherence solution that uses mobile experiences, AI software and behavioral economics principles to help people form healthy habits. Leaders in this discipline have provided decades of research to demonstrate how to predict irrational behaviors. The founders of Wellth used these same principles to establish a new way of forming new habits for healthier living. And we chose to focus on those who are often left behind and struggle the most: people with chronic medical conditions, people challenged by income insecurity, and people with the most forces pulling them away from forming healthy habits

Contact Wellth



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