

Case Study: Reducing Falls Among High-Risk Health Plan Members



The Situation

For a leading provider of Medicare Supplemental insurance, senior health care is top of mind. In 2021, they approached Homethrive with the goal of reducing suffering among their senior members, especially those in a higher-risk category for falls that result in increased Medicare Supplement claims costs.

According to the [CDC](#), “about 36 million falls are reported among older adults each year—resulting in more than 32,000 deaths.” For those age 65 or older, falling is the leading cause of injury in the U.S. However, with the proper support and precautions, seniors can avoid preventable accidents.

In order to test the effectiveness of Homethrive’s solution, the health plan launched a two-phased pilot with the objective of reducing falls among their high-risk members.

Pilot Phase I

Phase one of the pilot ran between November and May of 2021, and placed members in a fall prevention program that matched them with a Care Guide. Each Care Guide is a credentialed social worker with expertise in aging and caregiving, and qualified to coach seniors in fall safety.

The pilot included members who had fallen between November 1, 2020 and October 31, 2021 but who were not currently in a nursing facility or being treated for cancer or on dialysis. These members were determined to be high-risk, and most likely to fall again based on other comorbidities.

Results revealed that Homethrive’s intervention reduced the fall rate among high-risk members by about 20%, resulting in fewer claims and higher cost savings that were still being recorded even after the pilot had ended.

	Falls	No Falls	Total	Fall Rate
Control	135	406	541	25.0%
Homethrive	120	469	589	20.4%
Total	255	875	1130	22.6%

p-value 3.3%

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Member Story

A member that registered for the pilot program had recently fallen (not for the first time), only days before she had her first call with a Homethrive Care Guide.

At the time of the incident, she had fallen and after realizing that she could not stand up, she called for EMT assistance. She ultimately declined a trip to the hospital.

The Care Guide noticed that the member was having trouble speaking, and discovered that since her fall she had been in pain, especially when coughing or sneezing. She lived alone, had no family nearby, had not been driving, and had been eating frozen meals for several days for her convenience.

Although she refused a trip to Urgent Care or the ER, the Care Guide convinced her to contact her PCP about her pain. Ultimately, the Care Guide located the correct contact information, reached out to her PCP on her behalf, and followed up to make sure that she attended her appointment.

The doctor's visit was pivotal, and revealed that the member's fall had resulted in several cracked ribs, putting her at risk of developing pneumonia. After working with her Care Guide, the member hired in-home care, her sister came to stay with her, and she received a referral for a full neurological work-up.

Pilot Phase II

Phase two began on November 1, 2021, ran through March 1, 2023, and utilized direct educational outreach and access to Homethrive's intuitive online platform, rather than matched Care Guides. Homethrive's platform included recommendations for healthcare products and services and a library featuring fall safety resources.

Group 1, which had comorbidities that made them the most likely to have a fall, were not much helped by this less intensive approach. Note: it is believed that the intervention increased fall reports by 2.3% and that it was the increased awareness itself that equated to a greater number of fall reports.

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However, Group 2, who often believed that they were much less than 15% likely to have a fall, showed a marked improvement. This suggests a two-pronged approach.

Group		Falls	No Falls	Total	Fall Rate
1	Control	840	2531	3371	24.9%
	Test	306	817	1123	27.2%
	Total	1146	3348	4494	25.5%
2	Control	661	3070	3731	17.7%
	Test	157	1086	1243	12.6%
	Total	818	4156	4974	16.4%

p-value 0.001%

Outcomes

The experiment provided crucial learnings, reduced the fall rate for members, and resulted in cost savings that were still being recorded months after phase I of the pilot, totalling \$95,000 at the time of this report. Phase II also saw a 23% reduction in falls, resulting in less suffering among the health plan's members.

The health plan and Homethrive plan to continue to strive for improved quality of life for their members by reducing ER visits and hospital admissions.