

Case Study

Reducing Falls Among High-Risk Health Plan Members



The Situation

[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.

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

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: Live Support

Phase I 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 social worker with expertise in aging and caregiving, and are qualified to coach seniors and their loved ones in home safety matters.

The pilot included members who had fallen between November 1, 2020 and October 31, 2021 but who were not currently in a nursing facility, 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 cost savings** that were still being recorded even after the pilot had ended.

Pilot Phase II: Digital Solutions

Phase II 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 personalized recommendations for healthcare products and services and fall safety resources.

Phase II included two groups. Group 1, which had comorbidities that made them the most likely to have a fall, and Group 2, which consisted of a low-awareness segment.

This phase revealed that although high-risk members were better served with direct assistance from a Care Guide, low-risk members showed a marked improvement in their fall rate with the digital-only solution and outreach materials.

Ultimately, Phase II saw a 23% reduction in falls among health plan members.

Case Study

Member Story

A member that registered for the pilot program had fallen only days before she had her first call with a Homethrive Care Guide.

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 with no family nearby. Since her fall, she had avoided driving and was eating primarily frozen meals for her convenience.

Although she initially 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.



Results

\$500,000

in cost savings as of
May 2024

20%

reduced fall rate
among high-risk
members

23%

reduction in falls with
digital-only solution

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 one of the pilot, totaling \$500,000 as of May 2024.**

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