NEWFRONT

CASE STUDY

Newfront Dialysis Solution Reduces Employer Spend and Improves Member Experience



During a routine claim utilization review for a mid-sized, California-based company, the Newfront team identified a disproportionate spend on End-Stage Renal Disease (ESRD) claims. Upon further review, they concluded that costs associated with dialysis treatments were well above benchmarks, prompting them to seek a more costeffective solution.

The Solution

The Newfront team, led by Louisa Bolick, focused on identifying a strategic and holistic approach to address the outlying claims. The goal was to prioritize managing and reducing the financial burden of treatment costs for the company, while ensuring the highest quality care for affected members.

Newfront explored vendors specializing in kidney disease management and helped the client select a partner, then collaborated with the client's medical carrier to devise a targeted intervention. By redirecting members to a specialty dialysis provider, patients could work with a medical professional to have dialysis treatment at home a more comfortable and convenient option for the patient and a less expensive than outpatient treatment.

When given a choice, most members transitioned to the at-home treatment option. In the case of one member, home dialysis accelerated the transition to Medicare as the primary payor, protecting the client's self-funded health plan from any ongoing liability, including a potential kidney transplant.*

Newfront tracked this cohort to measure engagement and outcomes with the dialysis carve-out program. Over the course of the year, the program resulted in \$228,000 annual savings to the employer (8% savings on medical claims). Beyond the financial benefits to the employer, the members and their families received enhanced support from clinicians specializing in dialysis care and coordination. This support ensured high-quality care and improved health outcomes for these members, demonstrating the comprehensive success of the program. "We were able to prioritize both the patient experience and employer cost savings - a win for everyone," said Bolick, Executive Vice President and Founding Partner - Boston at Newfront.

*According to the NIH, in 2020, the average kidney transplant cost was US\$442,500.



IMPROVED MEMBER EXPERIENCE WHILE SAVING \$19K PER MONTH* OFF MEDICAL CLAIMS AND TRANSFERRING SOME OF THE RISK TO MEDICARE.

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Louisa Bolick

Executive Vice President and Founding Partner - Boston Newfront