

# Carrier-embedded Telemedicine Will Cost You More Than \$500,000



## Telemedicine Savings\*

**\$12,332**

Carrier Provided  
(competitor)

**\$524,626**

**FSH**

\*savings calculated using 1% utilization rate for the carrier 44% for FSH, \$717 avg savings per call (Veracity Healthcare Analytics study on savings from telemedicine),

## The Real Cost of "Free" Telemedicine

Healthcare costs are the biggest expense on a business's income statement after payroll. Reducing healthcare costs has a direct impact on the bottom line of any company and while many benefits promise to ultimately reduce healthcare costs, few actually deliver on that promise. One of the more promising benefits to reduce medical claims for employers is telemedicine. Some insurance carriers have embraced telemedicine's promise and often include telemedicine in their health plans, but with disappointing results.

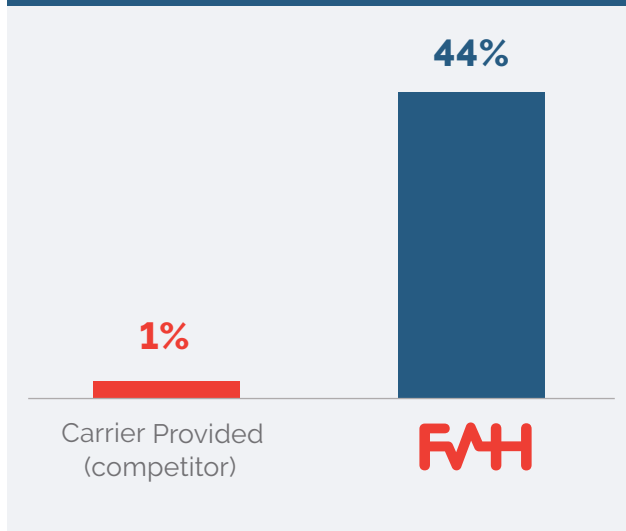
Carriers often embed telemedicine and "include" it in the premium. While the carrier might offer telemedicine at "no additional cost," the real cost of choosing this option is enormous. A "free" embedded telemedicine benefit could actually cost a 2,000-employee company more than \$500,000 in healthcare costs that could be avoided with a properly implemented telemedicine benefit.

## Why carrier-embedded telemedicine doesn't reduce costs

There are two big reasons why an embedded telemedicine benefit doesn't save any money. First, since all telemedicine consultations are run through as a claim, they don't reduce costs.

The bigger issue is that embedded telemedicine is rarely used. In fact, because embedded telemedicine only has a 1% or lower average utilization rate, a 2,000-employee company can expect to only generate about 17 diverted in-person visits per year. A benefit with usage that low provides no real value to anyone. Charging a copay, coupled with ineffective communication about when and how to use the benefit, result in incredibly low utilization rates.

### Telemedicine's Utilization Rates



## Why Consider First Stop Health?

First Stop Health takes an entirely different approach. First, we understand that in order to change behavior, we have to remove barriers. One of the biggest barriers is cost. We believe that employees deserve a no-cost, no-hassle way to access healthcare. When copays and fees are removed, employees use the benefit, and both employees and employers realize savings from diverted in-person visits. Next, we realize that it isn't enough to put a phone number on the back of an ID Card, hand out information at open enrollment and hope employees remember to call when spring allergies hit. Changing behavior requires a consistent communication strategy that is customized to the culture and unique characteristics of each organization. The benefits department or broker doesn't have the time to devote to engaging employees to use this benefit, so First Stop Health executes a customized engagement campaign to drive utilization.

At 44% utilization across our entire client base, we drive utilization rates 44 times higher than the carrier-provided solutions. High utilization drives significant savings for our clients. We are so confident that we will drive significant savings for our clients that we contractually guarantee we will save more money in diverted visits than the benefit costs--or we will refund the difference. First Stop Health offers the only savings guarantee in the industry.

So the choice is simple: Employers can choose between a "free" benefit that can actually end up costing them a fortune or a telemedicine provider that will guarantee savings while providing an amazing benefit for their employees. Let First Stop Health impact your company's bottom line, and your employees' lives.