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PHYSICAL MEDICINE SOLUTIONS

# Partner One-Pager

A quick-reference leave-behind for presenting Evolent's physical medicine management program to employer, broker, and health plan audiences.

| 13.5M | 3:1 | 83% | 88% |
|---|---|---|---|
| Lives managed | Average ROI | Provider satisfaction | Portal utilization rate |

## What it is

An end-to-end physical medicine management solution covering PT, OT, ST, and Chiropractic care (optional) for habilitative and rehabilitative populations in outpatient and home settings. Evolent right-sizes therapy dosage through early intervention and episodic review — ensuring the right care, the right number of visits, and the right transition to independence.

## How it works

- **Scope-focused UM** — PT, OT, ST, and Chiropractic (optional) across habilitative and rehabilitative adult and pediatric populations in OP and home settings
- **Early intervention** — episodic review and partial denials shape care from the first request, preventing overutilization before it becomes a pattern
- **Subspecialty-matched P2P** — 70+ board-certified providers including specialists in lymphedema, pelvic floor, vestibular, hand therapy, and pediatrics conduct specialty-matched peer-to-peer discussions
- **Provider analytics** — annual data-driven side-by-side comparison of providers across network, discipline, therapy type, and place of service; drives network optimization and value-based care strategies
- **Member engagement** — integrated SimpleTherapy digital platform delivers hybrid in-person/virtual PT; $2,699 average user savings, 66% reduction in surgical claims

## Why it's credible

- 13.5M lives managed nationally; footprint spans 30+ states across Medicaid, Medicare, and commercial
- 83% provider satisfaction score; 88% portal utilization rate; 3:1 average ROI (2024 FY all LOB data)
- 4:1 ROI in a northeastern Medicaid/commercial provider-sponsored plan with 218K+ members (6/2024–5/2025)
- 70+ board-certified providers for specialty-matched P2Ps; Independent Clinical Advisory Board covering PCPs, DPT, Interventional Pain Management, and MSK Surgeons
- Association partnerships with APTA, AOTA, and ASHA — Evolent collaborates with national therapy associations to limit provider abrasion through education and partnership

## The close

**"Let's find a time to walk through your numbers."** Always end with a concrete next step — a follow-up meeting, a data request, or a one-page collaboration document.

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# Train-the-Trainer Guide

The full talk track, supporting data, objection-handling appendix, and language guide for partners presenting Evolent's physical medicine management program externally.

## 1. THE TALK TRACK

### Open: Establish the problem

Physical medicine is a high-volume, low-cost-per-service category that is paradoxically difficult to manage. Lead with the operational pain before introducing Evolent.

- **High volume, episodic complexity** — PT, OT, and ST services are individually low-cost but aggregate into significant spend; traditional UM is too blunt for this category
- **Overutilization risk** — frequency and duration are often driven by provider habit rather than documented clinical need; members receive more visits than their condition requires
- **Fraud and waste** — unnecessary services, upcoding, and unbundling are well-documented patterns in outpatient therapy
- **Referral quality** — members are not always directed to high-quality providers; variation in provider performance creates inconsistent outcomes and cost

**Suggested pivot question:** "How are you currently managing therapy utilization, and what does your outlier provider population look like?"

### Establish credibility: Evolent at a glance

- 13.5M lives managed across all lines of business in physical medicine (2025)
- Footprint spans 30+ states, with active Medicaid partnerships across multiple regional and national plans
- 83% provider satisfaction score; 88% portal utilization rate; 3:1 average ROI (2024 FY all LOB data)
- 70+ health plan partnerships nationally; 20+ years of specialty management experience

### Show the scope: what Evolent manages

Walk through what's included and why the scope makes clinical sense. Physical medicine covers PT, OT, ST, and optionally Chiropractic in outpatient and home settings. Both habilitative (building skills never acquired, typically pediatric) and rehabilitative (restoring skills lost through injury or illness) populations are included.

- **Physical Therapy (PT)** — post-surgical recovery, MSK conditions, neurological rehab, vestibular rehabilitation
- **Occupational Therapy (OT)** — ADL retraining, hand therapy, pediatric developmental delays, lymphedema management
- **Speech Therapy (ST)** — language disorders, articulation, swallowing, voice, fluency across adult and pediatric populations
- **Chiropractic (optional)** — available as add-on scope; managed to the same episodic review framework
- **Subspecialty depth** — 70+ board-certified providers cover lymphedema, pelvic floor, vestibular, hand therapy, and pediatrics for specialty-matched P2Ps

**Frame the pediatric scope deliberately:** "This is one of the few programs where habilitative and rehabilitative populations are managed under the same model — we have the subspecialty depth to handle both."

### Explain the model: four components working together

- **1. UM and episodic review** — early intervention at the first request; partial denials right-size visit counts rather than issuing full denials; care shaping letters prompt transition to home programs when documentation supports it
- **2. Provider analytics** — annual data-driven comparison of like providers across discipline, therapy type, and place of service; KPIs include visits/episode, units/episode, cost/episode, passive care units, and active care %; outliers are engaged directly
- **3. Provider engagement** — four-quadrant model — Education & Training, Network Performance (daily KPI monitoring, quarterly reviews), Relationship Management (multi-channel, both high and low volume practices), Provider Research & Insights (Voice of Provider surveys)
- **4. Member engagement via SimpleTherapy** — hybrid in-person/virtual PT model; 1,500+ video-guided exercises; 1:1 video visits from DPTs, BH clinicians, and coaches; $2,699 average user savings; gold-carding for participating providers

**Tailoring tip:** Medicaid audiences — lead with episodic review and provider analytics. Commercial/employer audiences — lead with SimpleTherapy and the hybrid PT model.

### Prove it: results that matter

- 3:1 average ROI across all lines of business (2024 FY national data)
- 4:1 ROI in a northeastern Medicaid and commercial provider-sponsored plan with 218K+ members over a 12-month period (6/2024–5/2025)
- 6% full clinical decision reversal rate — only 15% of those are partial reversals; the vast majority of decisions hold on reconsideration
- 4.7% reduction in reconsideration rate year over year
- 88% portal utilization rate; 83% provider satisfaction score
- SimpleTherapy: 66% reduction in surgical claims, 50% reduction in MSK claims, 52% reduction in Rx claims, 55% reduction in DME claims
- Requests and approved visits per member both decrease over time as the program matures

### Close: ask for the next step

**"Let's find a time to walk through your numbers."** Never end a presentation without naming a concrete next step — a follow-up meeting, a data request, or a one-page collaboration of care document.

## 2. KEY STATS REFERENCE

Use this table as your source of truth when citing figures live. All stats are generalized national figures unless noted.

| Metric | Value | Source / Notes |
|---|---|---|
| Total lives managed (physical medicine) | **13.5M** | Evolent 2025 FY all LOB Physical Medicine Membership |
| National footprint | **30+ states** | Evolent Physical Medicine health plan partnerships |
| Health plan partnerships | **70+** | Evolent enterprise, all programs |
| Average ROI | **3:1** | Evolent 2024 FY all LOB MSK / Phys Med data |
| Portal utilization rate | **88%** | Evolent 2024 FY all LOB MSK |

| Metric | Value | Source / Notes |
|---|---|---|
| | | / Phys Med data |
| Provider satisfaction score | **83%** | Evolent 2024 FY all LOB MSK / Phys Med data |
| Board-certified providers for P2Ps | **70+** | Specialty-matched across all physical medicine subspecialties |
| Full CDR rate | **6%** | 2024 Evolent Performance Data |
| Partial CDR rate (of total CDR) | **15%** | 2024 Evolent Performance Data |
| Reduction in reconsideration rate | **4.7%** | 2024 Evolent Performance Data |
| ROI — specific Medicaid/commercial partner | **4:1** | 6/2024–5/2025; northeastern plan with 218K+ members |
| SimpleTherapy avg user savings | **$2,699** | Independently validated; SimpleTherapy data |
| Reduction in surgical claims (SimpleTherapy) | **66%** | SimpleTherapy data |
| Reduction in MSK claims (SimpleTherapy) | **50%** | SimpleTherapy data |
| Reduction in Rx claims (SimpleTherapy) | **52%** | SimpleTherapy data |
| Reduction in DME claims (SimpleTherapy) | **55%** | SimpleTherapy data |
| Video-guided exercises (SimpleTherapy) | **1,500+** | Covering 18 body parts |

## 3. OBJECTION-HANDLING APPENDIX

**"Physical medicine is low-cost per service. Is it even worth managing?"**

Low cost per service is exactly what makes this category hard to manage with traditional UM — and exactly why volume is the problem. Therapy visits add up fast across a population. Our model is specifically built for episodic, high-volume services: episodic review and partial denials right-size visits at the margin without blanket denials, and provider analytics identify outlier practices before the cost accumulates.

**"Won't therapists push back hard on prior auth for therapy?"**

83% of providers report being satisfied or extremely satisfied with Evolent, and 88% use the self-service portal. The model is built around provider relationships, not gatekeeping. Evolent partners with APTA, AOTA, and ASHA to stay aligned with professional society guidance — a meaningful differentiator from pure UM shops that therapists don't trust.

**"How do we know partial denials are clinically sound and won't create member harm?"**

Partial denials are issued when documentation shows the member is ready to transition — not as a cost-cutting measure. The clinical vignette from a pediatric speech therapy case shows the model in action: the treating therapist agreed the request was not medically necessary once the review focused on caregiver readiness and home program capability. The full CDR rate is 6%, with only 15% of those being partial — a low reversal rate that reflects high decision quality.

**"We're a Medicaid plan. Does Evolent have relevant experience?"**

Yes — Medicaid is the core of the physical medicine footprint. The 30+ state presence is built on Medicaid partnerships. The 4:1 ROI result is from a northeastern Medicaid and commercial provider-sponsored plan with 218K+ members over 12 months.

**"What's the ROI, and how is it calculated?"**

3:1 average ROI across the national book of business (2024 FY). In a specific Medicaid/commercial partnership, it reached 4:1 over a 12-month period. ROI is calculated from medical claims data — offer to size a population-specific estimate using their actual membership and therapy utilization baseline.

**"How does SimpleTherapy fit in? Is it required?"**

SimpleTherapy is an integrated partner, not a requirement. Plans can adopt the full hybrid model or use Evolent's UM and provider engagement program standalone. The hybrid model is most powerful because UM and the digital platform reinforce each other — prior auth activates members for SimpleTherapy, and SimpleTherapy data simplifies future authorizations.

**"Can you manage pediatric populations, not just adults?"**

Yes — pediatric habilitative care is explicitly within scope. The clinical team includes subspecialty expertise in pediatrics, hand therapy, pelvic floor, vestibular, and lymphedema. The Independent Clinical Advisory Board includes PCPs alongside therapy specialists specifically to address the complexity of chronic pediatric conditions.

**"How does the provider analytics tool actually work?"**

It's a claims-based comparison tool built from the health plan's own medical claims data. It compares like providers across discipline, therapy type, network, and place of service on KPIs including visits per episode, units per episode, cost per episode, passive care units, and active care %. Outlier providers get targeted engagement; high performers get reduced friction.

## 4. CERTIFICATION CHECKLIST

Use this checklist to confirm a trainer is ready to present externally. All four items should be satisfied before sign-off.

- ✓ **Teach-back:** presents the problem, scope, model, and results sections back to the group in under 8 minutes, unscripted
- ✓ **Objection drill:** responds live and accurately to at least two objections from the appendix, no notes — must include one clinical and one financial/ROI objection
- ✓ **Accuracy:** cites only the generalized national statistics in this guide — no invented or client-specific figures unless cleared for that audience
- ✓ **Language discipline:** correctly distinguishes habilitative vs. rehabilitative populations, partial vs. full denial, and closes with a concrete next step

**Sign-off authority:** trainer's manager or designated Evolent enablement lead. Route any live objection not covered here back to the enablement team for the next revision.