



The Inside Scoop on Outcomes

Five insider tips from Omada's clinical team

If you are evaluating a digital behavioral counseling program, like a diabetes prevention program (DPP), be sure to dig a little deeper. Claims like “Clinically meaningful weight loss at 16 weeks!” “Participants lose 15 pounds on average!” or “Half of our participants lose 7% of their body weight or more!” may sound impressive. But they probably aren't telling the whole story. **Be sure to ask, “Who, what, where, when, and how?”** A vendor's answers will provide real insight into how their program works, whether it will be the right fit for your population, and if it's worth the investment.

WHO was in the study population?

The right answer: a diverse population that's representative of yours.

It's well documented that intensive lifestyle interventions tend to be better for individuals who are older, male, Caucasian, and have higher socioeconomic status.^{1,2,3} Vendors should be clear about who participated in a given study, because that directly impacts the outcomes.

TIP #1 Ask to see the age, gender, race, and socioeconomic status of the population for which the vendor has calculated outcomes. Does that population match yours?

Omada makes it clear who participates in each of our studies. And we build custom models to demonstrate potential outcomes for your specific population.

WHAT method did the vendor use to calculate weight loss?

The right answer: precise, objective, and frequent data collection.

Depending on how vendors collect and calculate weight data, reported outcomes can be skewed or unverifiable. Are weights collected by an objective tool such as a connected scale, or are they self-reported? Are the results based only on a highly engaged subset of a vendor's participants or the entire population?

TIP #2 Ask if the vendor is using self-reported weights, or verified weights transmitted directly from a scale. Also ask them if they are reporting on their whole population, or a subset?

At Omada, we collect weight readings using a connected scale. So our customers can feel confident that the weight loss outcomes we share are accurate.

WHERE were outcomes validated?

The right answer: in the

peer-reviewed clinical literature.

Of course digital behavioral counseling providers would prefer to show only their best outcomes. But unless they're verified and published after independent, third-party peer review, the outcomes they share can't always be trusted.

TIP #3

Ask your vendors to provide you with peer-reviewed outcome studies for proof of external validation. In the peer-reviewed studies, look for a statistically significant change in lab tests such as hemoglobin A1c.

Omada has published nine peer-reviewed studies covering outcomes, ROI, and success with high-risk demographics such as seniors, veterans, and low-income populations.

WHEN did the vendor measure

clinical outcomes?

The right answer: 1 year and beyond.

It's nice to see "big" weight loss outcomes at 16 weeks or 6 months. But clinicians know that initial weight loss doesn't guarantee sustained weight loss. And reductions in chronic disease risk require that weight loss be maintained for years.

TIP #4

Ask your vendor to demonstrate sustained weight loss and A1c reductions over 1-2 years.

To date, Omada is the only digital health company with published two-year outcomes³ demonstrating sustained, meaningful weight loss and A1c reductions.

HOW will the vendor deliver ROI?

Outcomes-based pricing, based on outcomes you can trust.

TIP #5

Choose a DPP vendor that charges based on outcomes using a methodology you can trust.

There are two important reasons you're considering a digital behavioral counseling program: 1) to improve your population's health and 2) to cut your organization's healthcare spend. The best way to ensure the latter is to insist on outcomes-based pricing—not Per Employee Per Month or Per Beneficiary Per Month pricing.

Omada's fees are based on outcomes you can trust, and our ROI is calculated using a third-party model. Based on average participant results, employers and health plans are estimated to recoup their investment in Omada within two years. What's more, over five years, they'll achieve a predicted net savings of over \$2,000 per participant.^{4,5}

1 Look AHEAD Research Group (2014) in Obesity; <https://doi.org/10.1002/oby.20662>

2 Goode et al. (2016) in Eating Behaviors; <https://doi.org/10.1016/j.eatbeh.2015.11.009>

3 Sepah et al. (2015) in Journal of Medical Internet Research; <https://www.jmir.org/2015/4/e92/>

4 Su et al. (2016) in Preventing Chronic Disease; <https://doi.org/10.5888/pcd13.150357>

5 ROI calculation based on 3rd party-developed Markov model adjusted for medical cost inflation, (reference 4, above) and Omada's published weight loss outcomes (4-5% weight loss at week 26 following date of enrollment) and 2017 pricing. Actual results and cost savings may vary based on age, gender and other individual and demographic factors.

Clinical outcomes that are relevant, verifiable, validated, and durable are the only

outcomes that you can count on to deliver the ROI your organization needs.

To learn more, contact your Omada representative.

omadahealth.com