Marathon | Clinic vs Non-Clinic Utilizers

Clinic Utilizers

2,662 Subscribers
3,665 Members
Avg Family 1.38

Non-Clinic

1,770 Subscribers
5,520 Members
Avg Family 3.12

Key Insight

Clinic utilizers spend $809 less PEPM on Med+Rx which is a 47% savings advantage vs. Non-Clinic.

Claim Comparison

Metric	Clinic	Non-Clinic
Medical PEPM	$491	$1,106
Pharmacy PEPM	$425	$619
Med+Rx PEPM	**$916**	**$1,725**

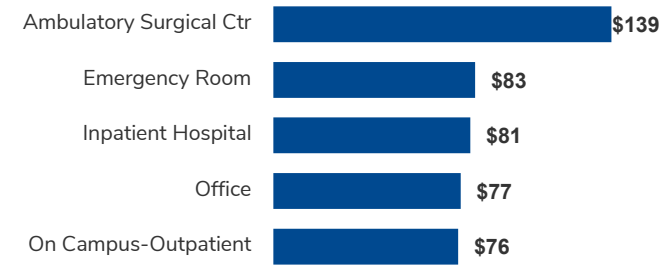
Risk Scores

Score	Clinic	Non-Clinic
Concurrent	**1.16**	1.06
Prospective	**1.21**	1.07

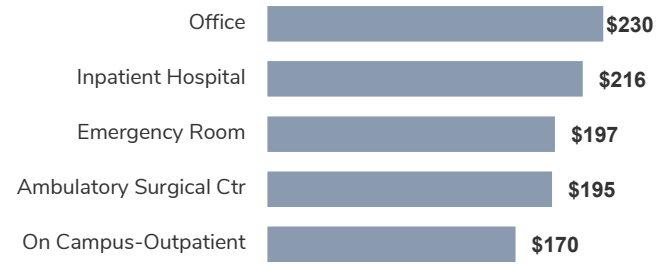
ER Utilization

Metric	Clinic	Non-Clinic
Visits / 1,000	**345**	1,026
Allowed / Visit	**$3,073**	$2,514

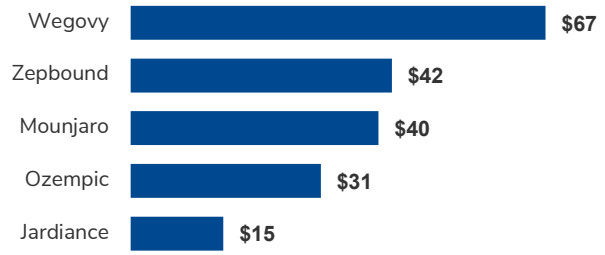
Top 5 Places of Service - Clinic Utilizers (PEPM)



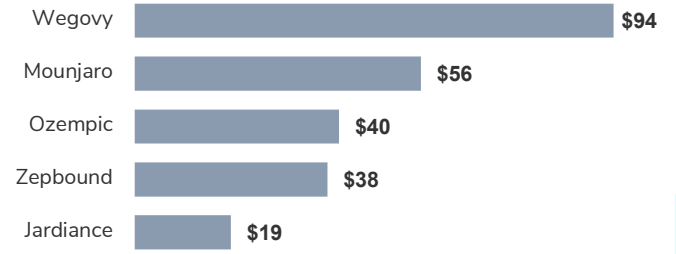
Top 5 Places of Service - Non-Clinic (PEPM)



Top 5 Drugs - Clinic Utilizers (PEPM)



Top 5 Drugs - Non-Clinic (PEPM)



1. A Clinic Utilizer is defined as any member with at least one onsite clinic visit in PY 2025.
2. High-Cost Claimants ≥$100K were excluded from both populations.
3. A population can have a high-risk score AND lower PEPM claims based on numerous factors (effective care management vs. acute treatment; coding intensity).

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Onsite Clinic Participation | 2025 vs 2024

55.8%
2025 Engagement Rate

36.0%
2024 Engagement Rate

8,012
Total Eligible Members

DIVISION	2025 ENGAGEMENT	2024	YOY CHANGE	MARATHON EFFECTIVE
1	82.8%	23.9%	▲ 245.7%	Apr 2024
2	33.2%	8.8%	▲ 279.3%	Apr 2024
3	45.3%	15.9%	▲ 185.4%	Jul 2024
4	62.5%	52.0%	▲ 20.2%	Jan 2024
5	71.7%	60.6%	▲ 18.3%	Pre 2024
6	68.9%	66.5%	▲ 3.6%	Pre 2024
7	62.8%	62.6%	▲ 0.3%	Pre 2024
8	43.8%	—	New	Jan 2025
9	55.1%	50.2%	▲ 9.7%	Jan 2026
10	79.7%	62.2%	▲ 28.2%	Jan 2026
Total / Average	55.8%	**36.0%**	▲ 55.1%	

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Onsite Clinic – Utilization and Risk | CY 2025

16,720
Total Clinic Visits

3.74
Avg Visits / Engaged Member

47.3%
Members w/ Chronic Condition

4,263
Assumed Chronic Condition Patients

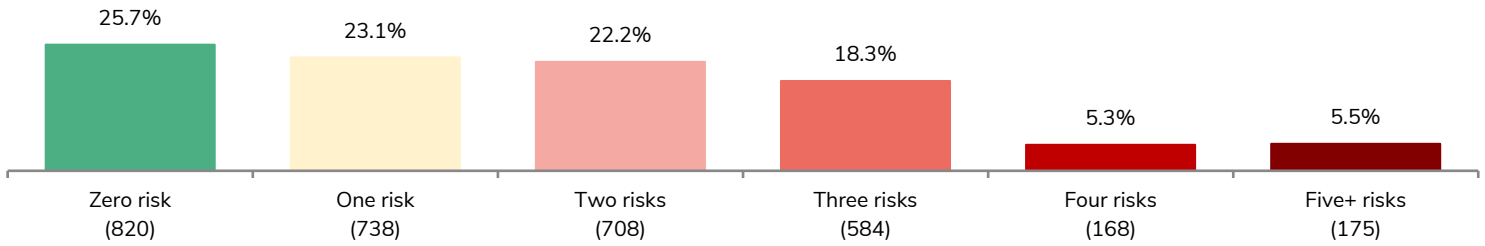
DIVISION	VISITS	VISITS / MEMBER	% PREV.	% CHRONIC	CONC. RISK	PROSP. RISK	RISK % CHG
1	1,266	2.22	33.4%	29.6%	0.75	0.79	▲5.3%
2	1,157	2.46	25.9%	42.8%	1.40	1.38	▼1.4%
3	1,513	2.31	11.6%	47.7%	1.11	1.12	▲0.9%
4	1,317	2.74	29.2%	45.4%	0.97	0.99	▲2.1%
5	3,206	4.39	25.8%	63.3%	1.12	1.13	▲0.9%
6	415	3.07	27.7%	70.7%	1.04	1.15	▲10.6%
7	602	1.76	42.4%	65.5%	1.14	1.17	▲2.6%
8	842	3.33	30.4%	52.6%	1.22	1.19	▼2.5%
9	4,629	8.42	11.2%	85.5%	1.04	1.05	▲1.0%
10	1,773	6.29	8.9%	73.0%	1.06	1.23	▲16.0%
Total	**16,720**	**3.74**	**20.4%**	**47.3%**	**1.02**	**1.06**	**▲3.9%**

Biometric Risk | R12 Dec25 vs P12 Dec24

PREVALENCE OF BIOMETRIC RISKS (SCORECARD)

BIOMETRIC NAME	TOTAL SCREENED	% HI/MOD CURRENT	% HI/MOD PRIOR	DELTA	% OF PATIENTS BY RISK CATEGORY (Low Risk / Medium Risk / High Risk)
Body Mass Index	3,111	46.1%	47.8%	▼ 1.7%	53.9% / 23.6% / 22.5%
Diastolic Blood Pressure	2,729	49.4%	48.9%	▲ 0.4%	50.6% / 37% / 12.3%
Systolic Blood Pressure	2,729	64.7%	64.7%	— 0.0%	35.3% / 51.2% / 13.6%
A1C	890	45.3%	56.1%	▼ 10.8%	51.1% / 33.9% / 11.3%
HDL Cholesterol	1,165	37.3%	30.8%	▲ 6.5%	62.6% / 37.3%
LDL Cholesterol	1,130	25.1%	29.6%	▼ 4.4%	74.9% / 18.7% / 6.5%
TC / HDL Ratio	1,288	19.7%	20.3%	▼ 0.6%	80.3% / 19%
Triglycerides	1,170	26.8%	27.5%	▼ 0.7%	72.9% / 26.4%

PATIENTS BY HIGH/MODERATE BIOMETRIC RISK COUNT



1. Illustrates % of Patients in Low, Moderate and High-risk biometric categories. Threshold definitions in Appendix A.
2. Green arrows = positive change; Red arrows = negative change.

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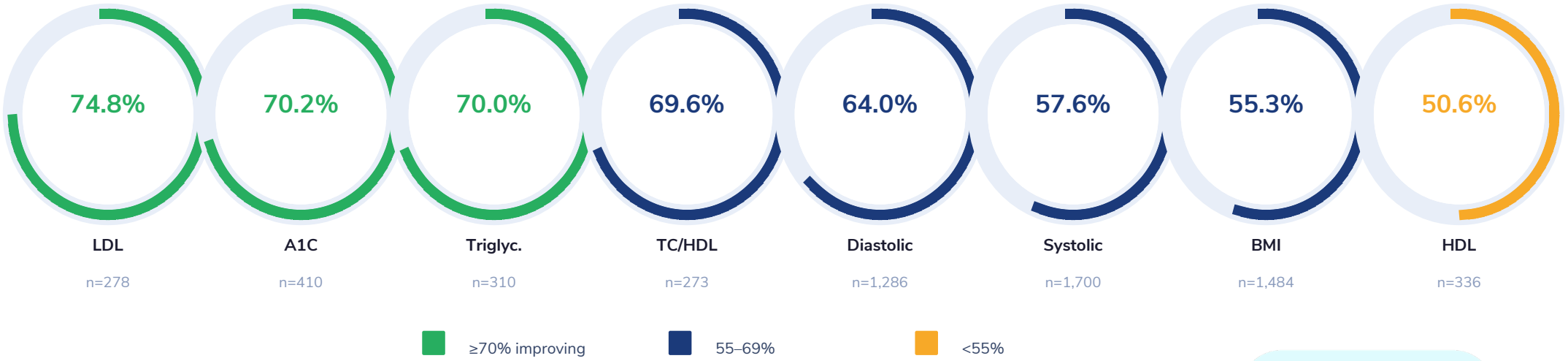
Biometric Cohort

3,227
Total patients screened

2,434
Starting at high/mod risk

1,868
Showing improvement

76.7%
Overall improvement rate



% Making Improvement = patients who were high/moderate risk and improved ÷ original high/moderate risk population. BMI example: 820 ÷ 1,484 = 55.3%
n = patients starting at high risk
Patients screened at least twice over 24 months — first screening vs. most recent (not YoY).

Marathon Health – Revised ROI *(based on actual costs)*

- ✓ Revised ROI (based on actual costs) = 1.18
  - Revised net savings = $803,971
  - Actual Costs captured were office visits, ER and UC visits and generic Rx.
    - Health Center Visits value was diluted to 25%.
  - Referral rate was adjusted from $967 to $600 per referral based on Midwest and Southeast regional benchmarking.
  - Assumes Chronic Condition Management savings unchanged.

Revised ROI Based on Actual Costs	Total
Value of Health Center Visits	$689,471
Chronic Condition Management Savings	$2,828,100
Member Out of Pocket Savings	$242,491
Same/next Day Availability	$398,140
Provider Referrals	$426,000
Revised Estimated Value	**$4,584,203**
Total Marathon Costs	**$3,780,232**
Net Savings	**$803,971**
Revised ROI	**1.18**