# Learnings from COVID-19: Integrating Wellbeing & Social Determinants

June 16 | 10:00 AM - 10:45 AM ET



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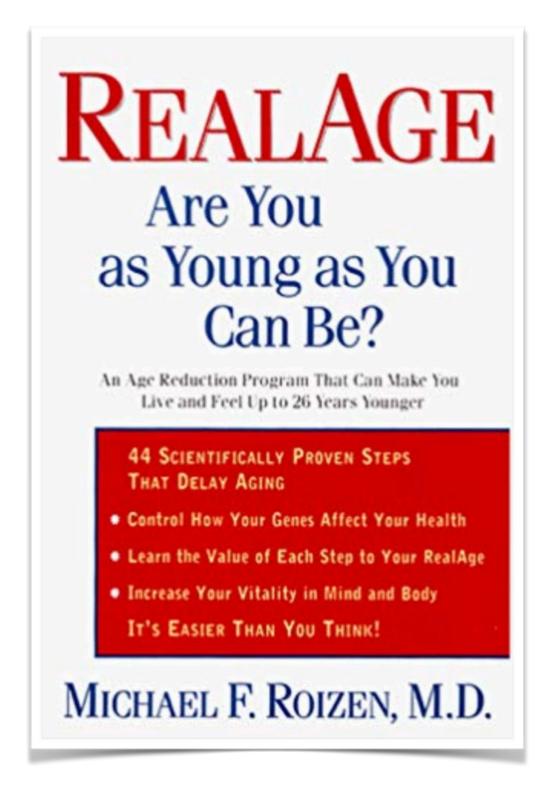


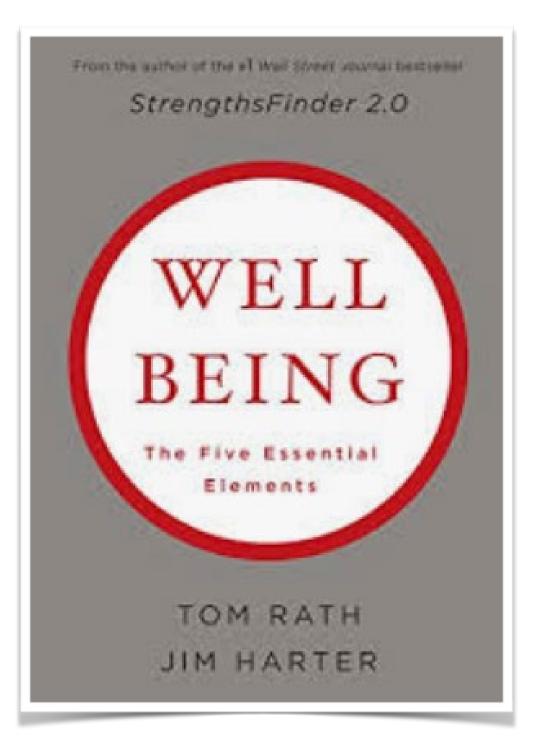


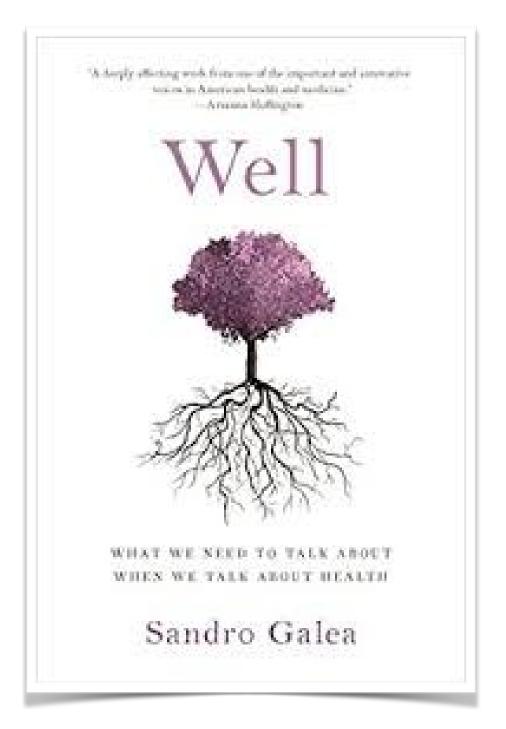


## Sharecare community well-being index Sharecare Risk Measurement History

- Over the past 10 years, Sharecare has developed measurement capabilities across three core instruments and measurement types — with the goal of adopting, augmenting and scaling proven scientific instruments across our platforms
- These measurement tools represent over 70 years of health risk assessment and measurement from the Framingham model developed in the 1950s to World Health Organization (WHO) and CDC social determinant constructs developed as recently as the 2000s











**Financial** 

#### SHARECARE COMMUNITY WELL-BEING INDEX

Social

## Community-Driven Care: Combining Measures & Outcomes

Through a combination of these core measures, anchored in concepts across individual and community transformation, Sharecare is able to measure the length, quality, and circumstances that define our individual and collective health journeys

#### **INSTRUMENTS & MEASUREMENTS**

## INDIVIDUAL & COMMUNITY CONTEXT

#### **INDEXES**

#### **PROVEN OUTCOMES**



Community

RealAge®

Circumstances that define our Years

Quality of Years

Longevity of Years

- Mortality
- Physical Well-Being
- Financial Well-Being
- Social Well-Being
- Purpose Well-Being
- Community Well-Being
- Neighborhood & Built Environment
- Social & Community Context
- Health & Healthcare
- Education
- Economic Stability
- Economic
- Thriving
- Vulnerable Populations
- Healthcare
- Accessibility

- Longevity
- Medical & Rx Spend
- Emergency Room Visits
- Hospitalizations
- Bed Days
- Absenteeism
- Presenteeism
- Short-term Disability
- Job Performance
- Intention to Stay
- Voluntary Turnover
- Involuntary Turnover
- PMPM Cost
- S&P 500
- Unemployment
- Consumer Price Index



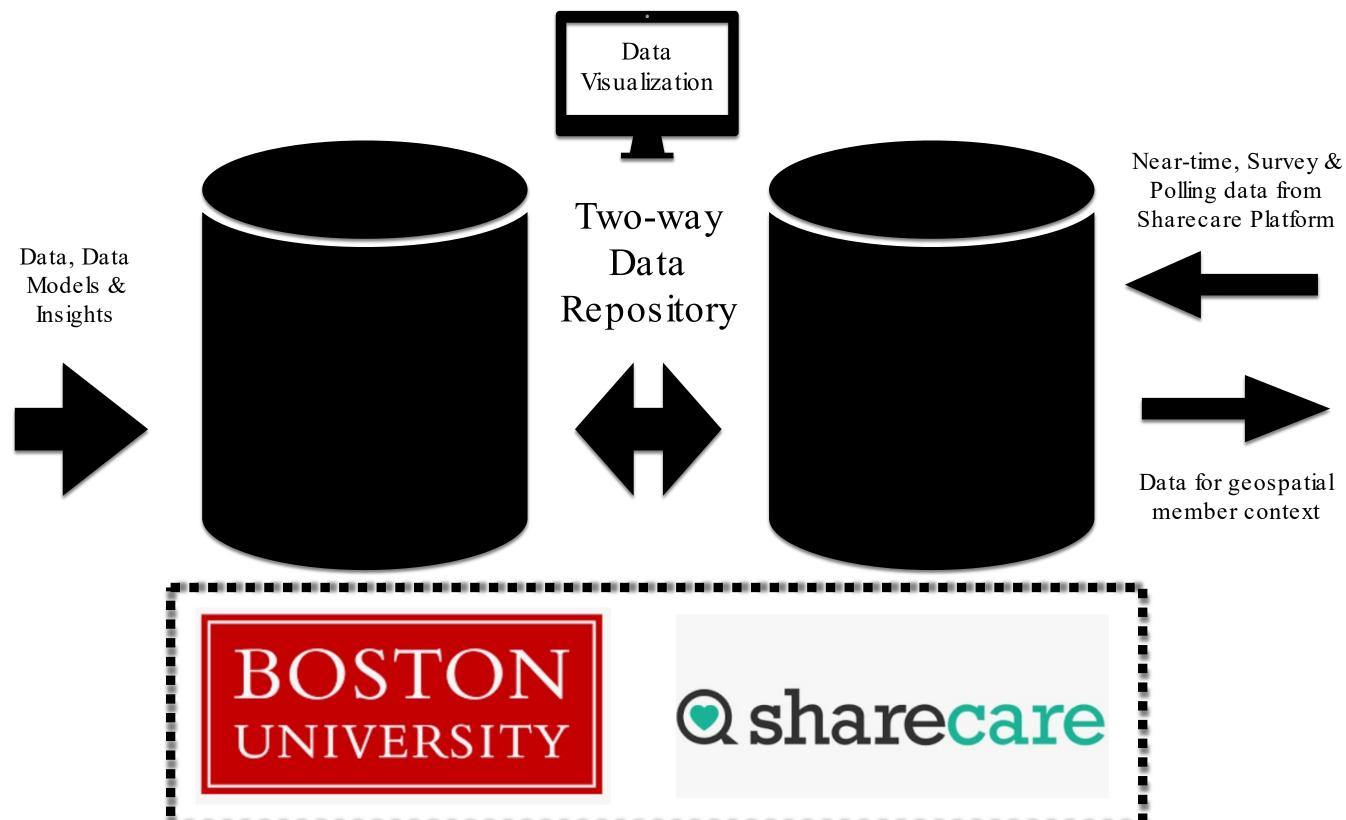


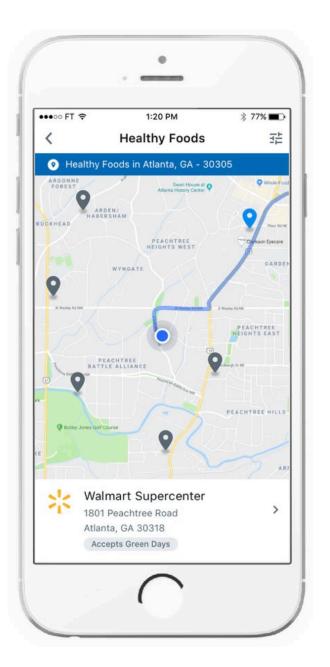
## SHARECARE COMMUNITY WELL-BEING INDEX

### COMMUNITY-DRIVEN CARE — ECOSYSTEM

Anchored in our relationship with Boston University's School of Public Health, led by Dr. Sandro Galea, the Sharecare ecosystem invites best-in-class academic collaborators and partners to contribute data and insights direct to our platform, lending to near-time sharing of data, models and applications that flow from data sciences environments to our member experience

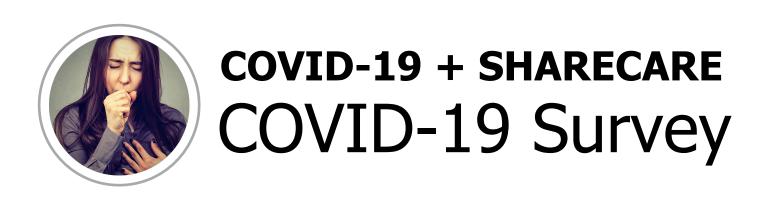






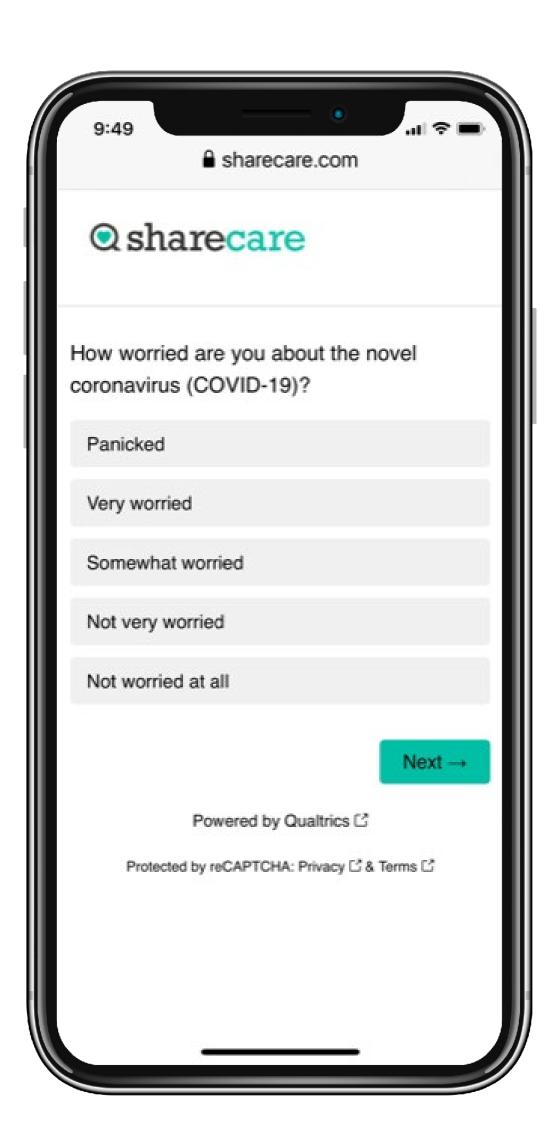
Location-centric Member
Experience fueled by CWI &
Mapping APIs

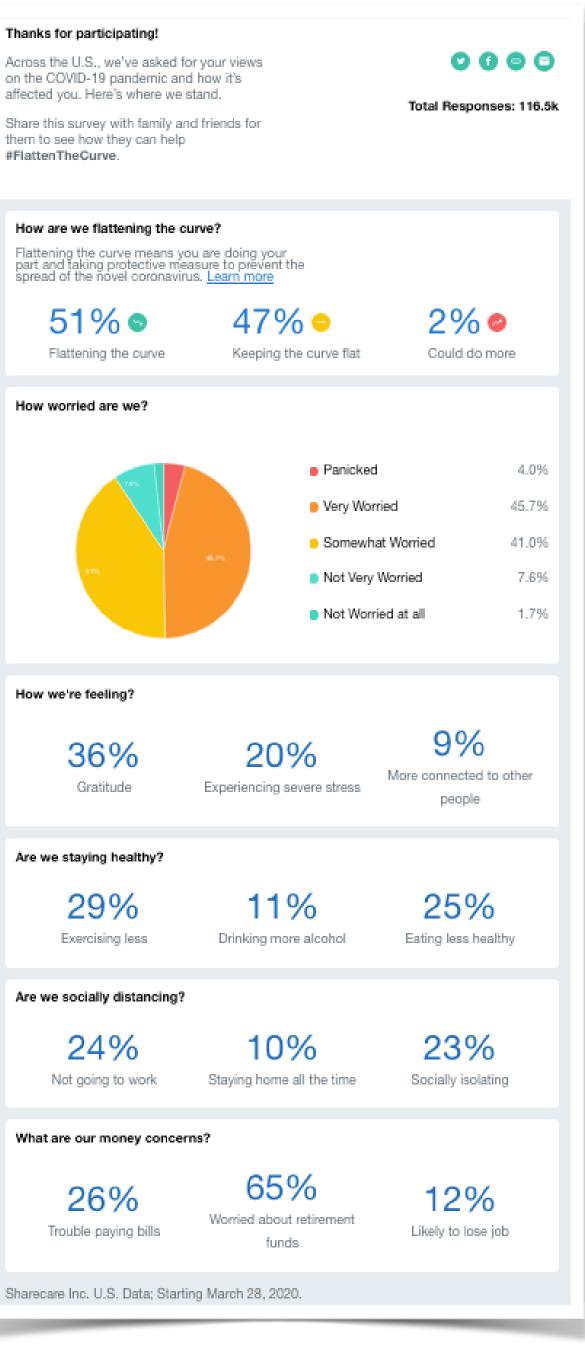




Comprehensive survey to identify what percentage of the population is willing and/or capable of adhering to the recommendations to stop the spread of the coronavirus.

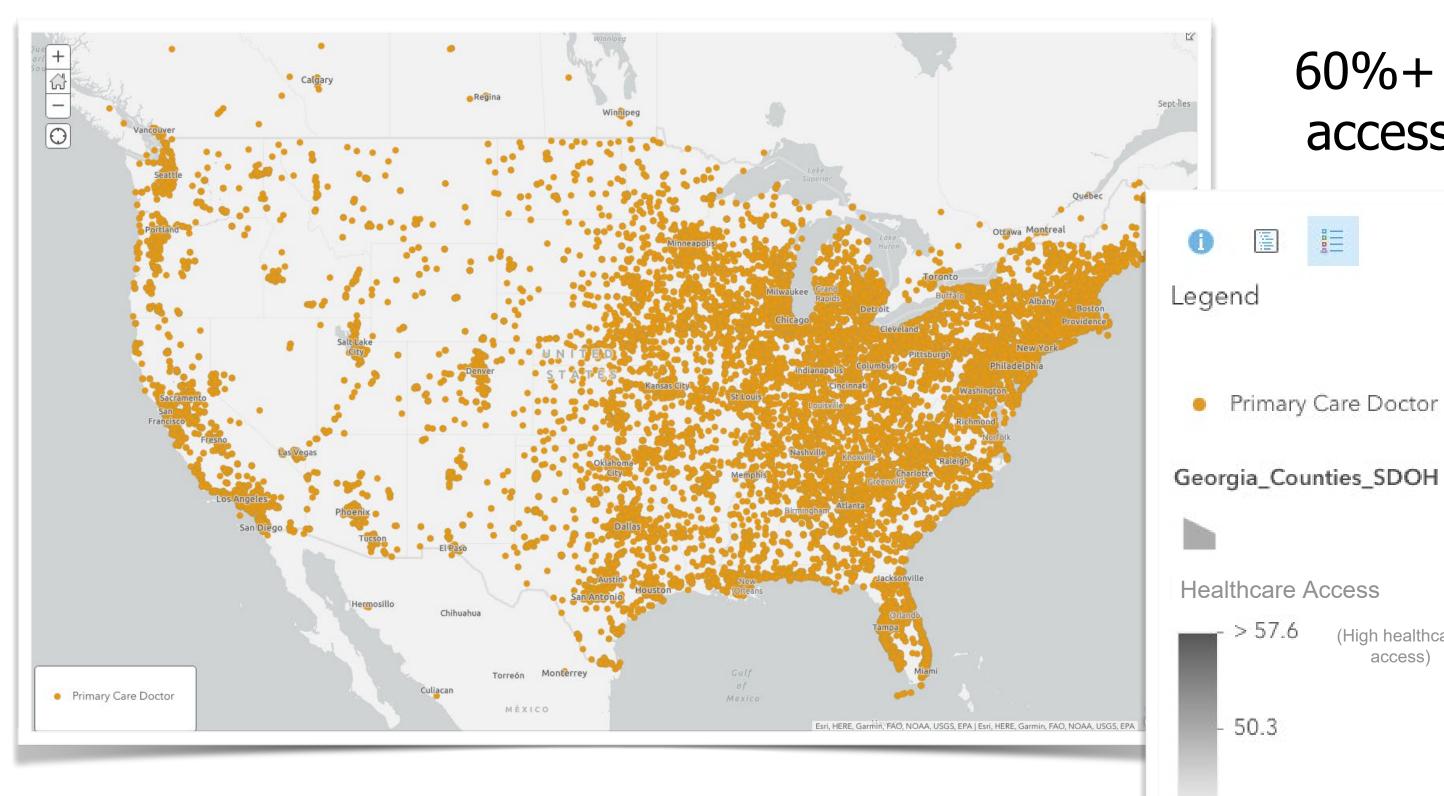
117K+
Total participants





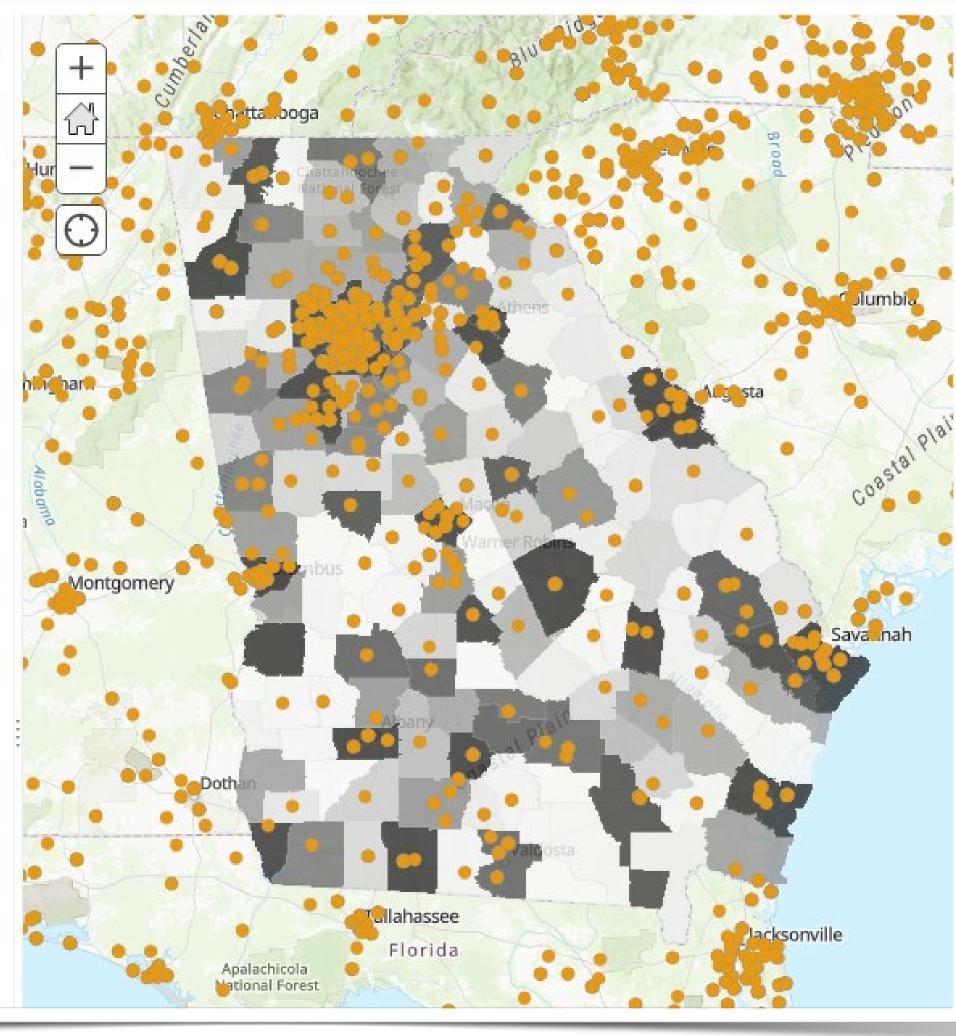


## SHARECARE COVID-19 SURVEY COVID-19 Survey: Results — Healthcare Access



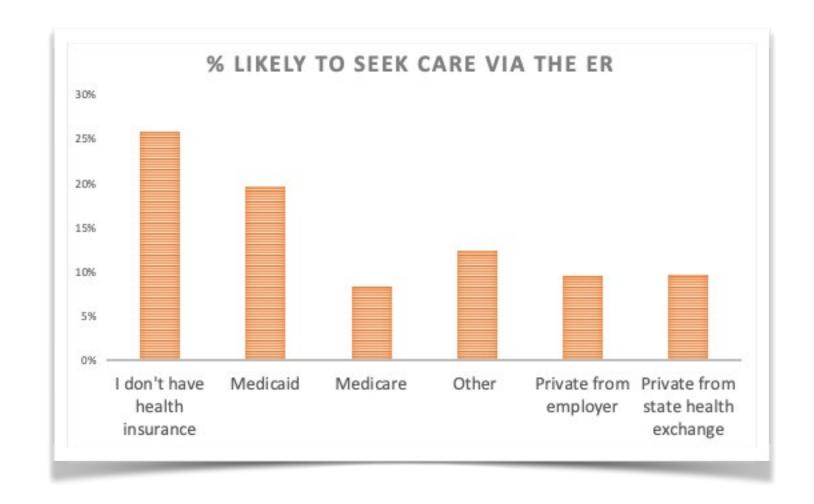
60%+ of respondents indicate they would prefer to access care with their primary care physician (left)

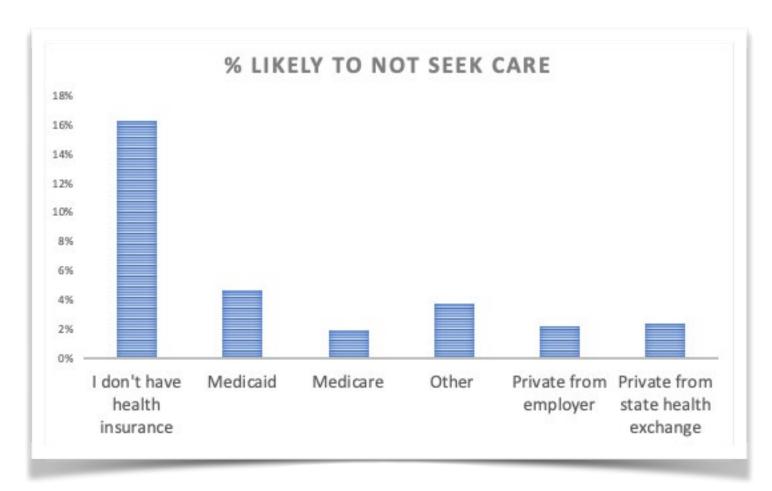
Preference for accessing healthcare via primary care physicians is prevalent even in healthcare deserts / areas where access to MDs, OBGYNS, and Pediatricians per capita is low (right)

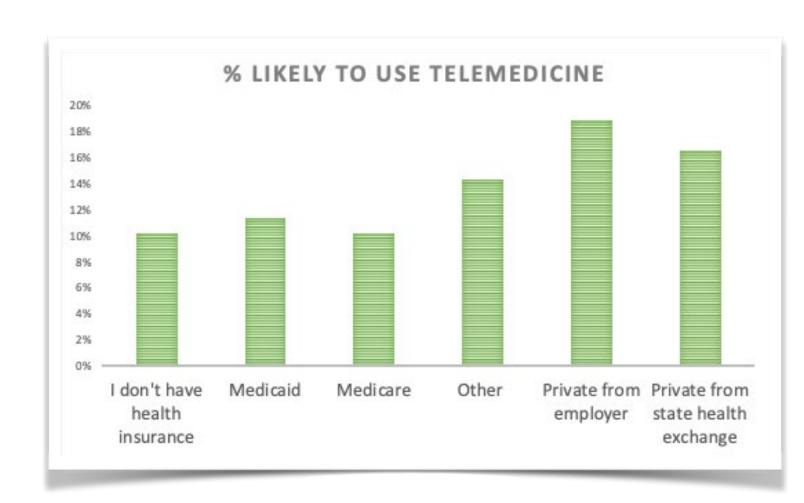




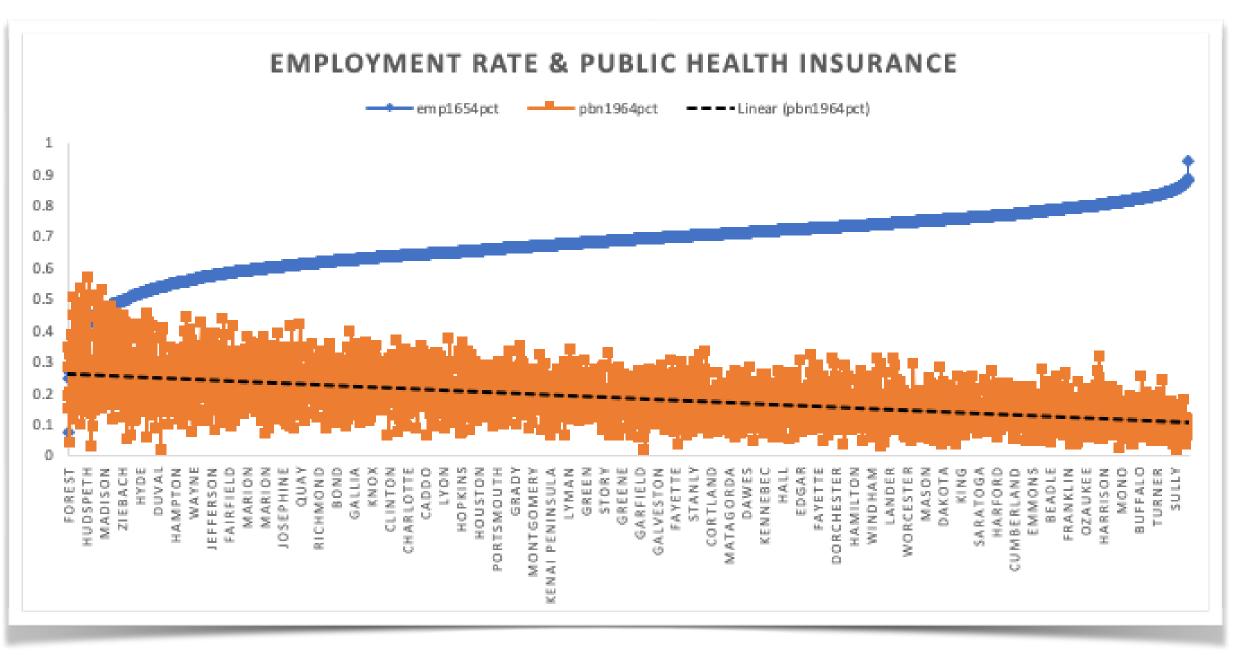
## SHARECARE COVID-19 SURVEY COVID-19 Survey: Results — Health Insurance







- % ages 19 to 64 on public health insurance at the county level varies significantly — from Kenedy County in TX with less than 2% of individuals ages 19 - 64 on public health insurance to Owsley County, Kentucky with almost 57% of individuals ages 19 - 64 on public health insurance
- Employment rates also vary significantly, from 8% to 94%+



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