

Whole-Person Care. Whole-Plan ROI.



A Strategic Framework for Health Plan Leadership

Behavioral health is no longer a benefits line item. It is a strategic lever for total cost of care. The plans winning on cost and quality are those that have reframed behavioral health as a precision investment with measurable clinical, financial and operational returns.

The Financial Case for Action

2-3X

Higher medical costs for members with co-occurring BH conditions

\$1T

Annual global productivity loss from depression and anxiety alone

\$1.90

Medical cost savings returned for every \$1 invested in BH benefits

Why Traditional Approaches Fall Short

Utilization metrics (sessions, medication fills, access rates) not whether it works or what it costs downstream.

Restricting access backfires: 36% of insured adults with moderate-to-severe BH symptoms still received no care, before adding more barriers.

Commercial BH spending is projected to grow ~8% annually, outpacing general medical trend.

Siloed point solutions create friction, administrative burden and fragmented data, obscuring real ROI.

Without integrated data, plans cannot connect BH investment to cost offsets, productivity gains or member retention.

The Precision Investment Model

Analytics-Driven Triage: Match members to the right level of care at first contact - from digital self-care to intensive outpatient - based on clinical severity, preferences and predicted outcomes.

Integrated Data & Measurement: Connect claims, clinical assessments (PHQ-9, GAD-7), and engagement data to track downstream medical cost offsets, ER reduction and disability claims.

Outcomes-Based Contracting: Shift from volume-based reimbursement to performance contracts tied to clinical and financial outcomes - aligning incentives across the care ecosystem.

Preventive Front Door: Intercept members before crisis. Digital self-care tools and early assessment reduce escalation into high-cost, acute BH episodes.



For the first time ever...

behavioral health visits surpassed primary care visits in 2024, 66.4 million vs. 62.8 million, signaling that BH is no longer a secondary concern. It is a primary one.

"When behavioral health is positioned as a value driver rather than a cost center, it unlocks new opportunities for affordability, member retention and innovation in care delivery."

- Joe Burton, President & CEO, NovaOne

A Complete ROI Framework: What To Measure

Value Domain	Key Metrics	Audience Relevance	Type
Clinical Outcomes	PHQ-9 / GAD-7 improvement; therapy completion; medication adherence	CMO, Quality leadership	Clinical
Medical Cost Offset	ER / inpatient reduction; readmission rates; chronic disease management costs	CFO, Actuarial, CSO	Financial
Workforce & Productivity	Absenteeism, presenteeism, disability claims, employee retention	Employer accounts, Product	Operational
Access & Engagement	Time-to-care, network adequacy, Digital Front Door utilization	Product Innovation, Operations	Strategic
Member Satisfaction & Retention	CAHPS BH scores, member-reported outcomes, plan retention rates	CMO, Product, Growth	Clinical

How NovaOne Operationalizes This Framework



Preventive Digital Front Door

Science-based, on-demand self-care tools that intercept members early - reducing escalation and total BH spend while generating engagement data.



Clinically-Validated Assessments

Proprietary tools guide members to appropriate care levels and track improvement over time - creating a continuous outcomes data loop.



Evidence-Based Provider Network

25+ provider partners covering 100% of the costliest BH conditions. Average speed to care under 5 days - eliminating the access gap that drives cost.



Integrated Analytics & ROI Reporting

Connect BH engagement to claims data, productivity metrics, and member satisfaction - enabling plans to demonstrate measurable value to all stakeholders.

Ready to redefine behavioral health ROI for your plan?



NovaOne is trusted by six health plans, thousands of employers and 15M+ members. Scan the QR code or visit NovaOneHealth.com to get in touch with our team for a demo.

Sources: WHO, Evernorth Research Institute, JAMA Network Open, PwC, McKinsey & Company