

We'll begin shortly

While you wait, please type in the chat box...

1. From where are you joining?
2. What healthcare gamification question is top of mind for you?



Solving the VBC Cost-Quality Paradox

Patient engagement innovations
& strategies that increase quality
and lower costs for value-based
care providers.



About Jordan Dolin

Jordan Dolin, an intrepid entrepreneur with more than 30 years of experience as a founder and operator, has been in the healthcare industry for the past 20 years and has been supporting and educating other entrepreneurs for more than 2 decades.

In late 2016, Mr. Dolin co-founded The Furthur Fund, a platform to foster and invest in early stage companies that are focused on healthcare innovation. In 2002, Jordan founded Emmi Solutions, a healthcare technology company that leverages interactive media to engage and empower patients to take a more active role in their care, which was acquired by Wolters Kluwer in 2016.

Prior to founding Emmi, Jordan spent three years on the leadership team of an artificial intelligence software company and fourteen years successfully leading a consumer products company that he co-founded in 1986.



In addition to pursuing his own business ventures, Jordan has been an Adjunct Professor of Entrepreneurship at the University of Chicago's Graduate Business School for more than 20 years.

He is also an author and frequent speaker on the topic of healthcare innovation has presented at numerous conferences/events including the Institute for Healthcare Improvement (IHI), American Hospital Association (AHA), American College of Healthcare Executives (ACHE), American Society for Healthcare Risk Management (ASHRM), Becker's, Med City, among others.

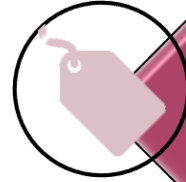
You already know this but...

Compared to every other
advanced economy...

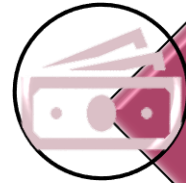
US Healthcare is a MESS



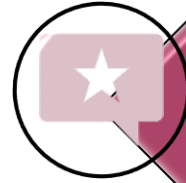
How bad is it?



We spend 2X on healthcare per capita!



With higher administration costs!



Poor ratings for many quality measures!



Highest % of adults with chronic conditions!



But we're #1 for obesity!

An **UNSUSTAINABLE** Situation



A small percentage of the population accounts for the bulk of healthcare spending.



Leaving limited and fewer resources to support wellness efforts & **PREVENTATIVE** care.



But focusing on prevention and wellness is the **ONLY** way to bend the cost curve!





“Houston, We Have A Problem...”

**“No, The Solution
Wont Be In Epic’s
Next Release”**

Rather than calling it “Impossible”...

We'll name it:

Value-based Care

Improve Quality While Reducing Cost?

Value Based Care is only viable option for fixing the health system

- Reducing the cost of care for the 5% of “Super Users” doesn’t work
- Only realistic solution is to reduce the prevalence/impact of chronic conditions
- Economic incentives are shifting (At Risk Contracts, Shared Savings...)
- In theory it makes sense but the underlying assumption is optimistic
- Because they assume that patients will be active participants in the process
- None of these models can succeed without **Patient Engagement**

“An ACO is trying to make people accountable for the outcomes, but it doesn’t drive patient behavior. They’re two separate animals,”

“Providers should be conscious of the fact that patient engagement will be an integral part of the success of an ACO”

**Bruce Hallowell
Managing Director
Navigant**

Why Are ACO's So Important? (Timing!)

He has Pre-Diabetes



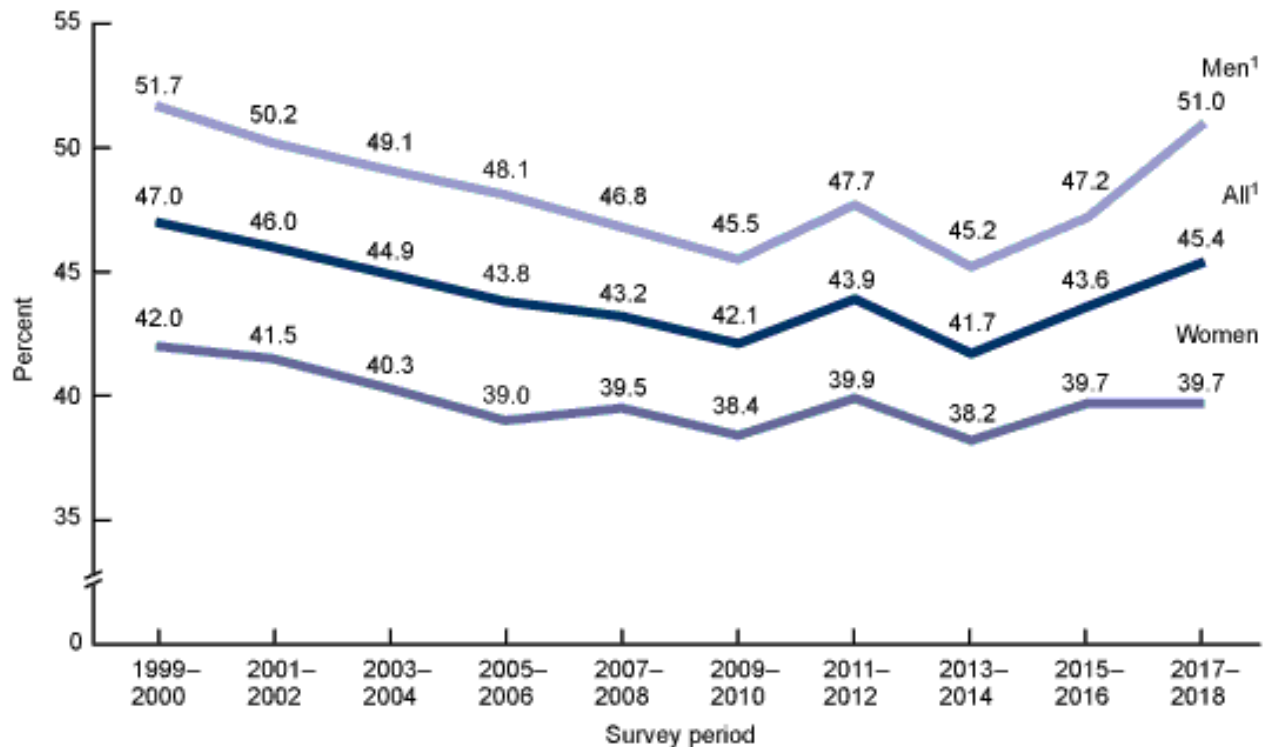
He has Diabetes



Let's estimate the time & effort required to change their behaviors

Hypertension is a Perfect Example

It's Common, It's Costly
And It's Getting Worse!



We Know How To
Treat It And Yet...

- The number of cases is growing
- Average patient is getting younger
- Effects 50% US adults
- Only 25% have it controlled
- Medication is readily available
- Cost is \$50B+ annually
- Kills 1000 people per day

How Can That Be?

**Because The Problem
Isn't Clinical...**

It's Compliance!



We know what to do—but can't afford it

Patients who receive ongoing support are more compliant & healthier:

- An average PCP has 2000 patients (est. ½ are hypertensive)
- 25% of hypertensive patients have it well controlled
- Remaining 75% require additional support, reminders, encouragement
- In a group with 4 providers, this amounts to 3000 patients
- Spending just 1 minute per patient weekly requires 2600 hours
- That would take nearly 1.5 FTE's for just 1 condition
- Spending an extra \$100,000+ for a 4 MD group is not a viable option

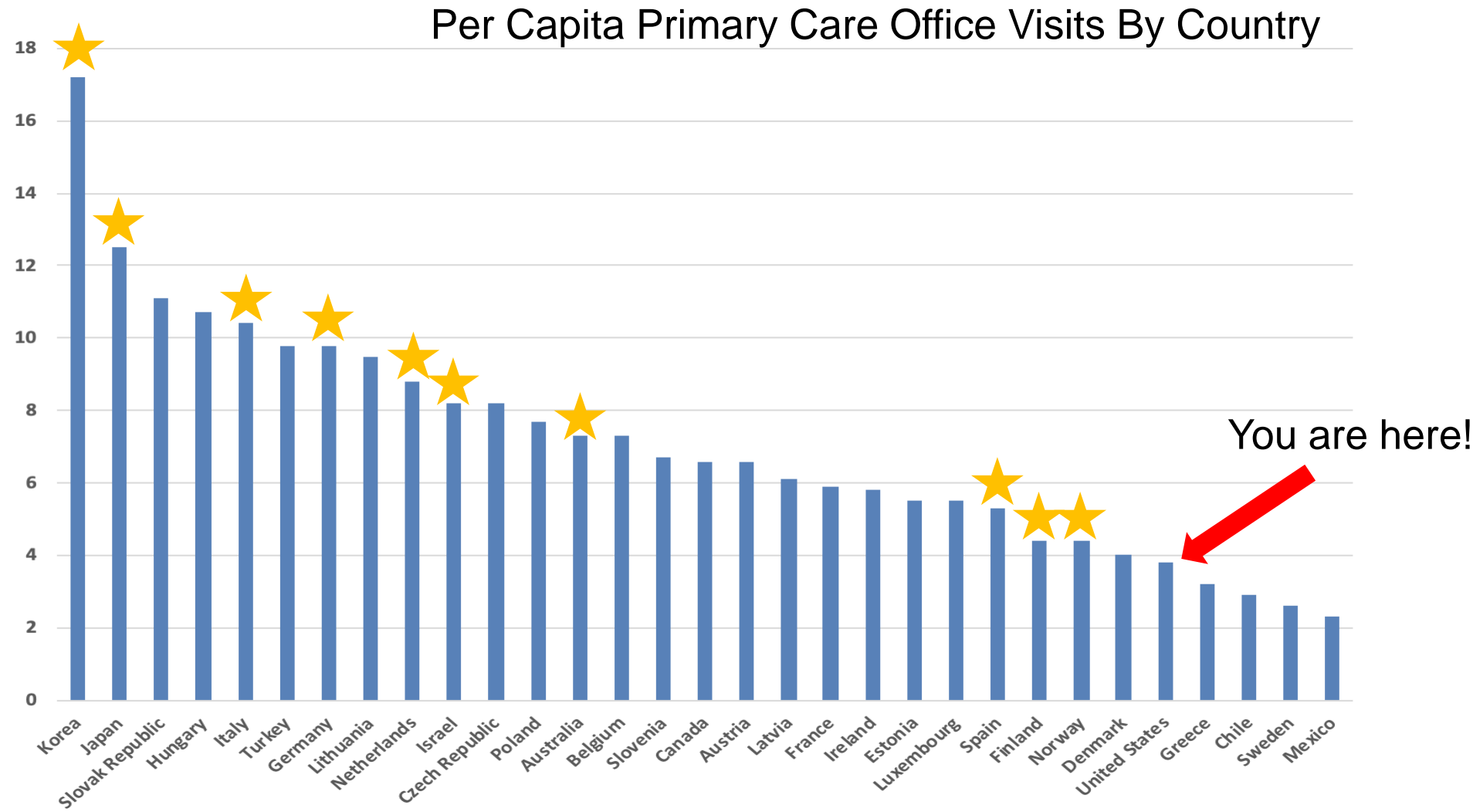
They need to find affordable tools that can support the care process

Transformation within healthcare will not be fully realized without patient involvement and engagement.

And the need is going to increase.

An awful lot.

Because More Touches = Better Outcomes



Patient Engagement* is:

- **Affordable**
- **Efficient**
- **Effective**

***Not everything called engagement is actually engagement**

Done Correctly, The Impact is Clear

The data is available, credible vendors will proactively provide it

- There is a well validated tool, PAM, for measuring engagement levels
- Large number of conducted/published (Emmi did more than 200)
- Broad range of results have been measured and documented
 - Compliance with physician instructions, medication adherence
 - Improved scheduling and attending recommended screenings (i.e. mammograms)
 - Significant reduction in HbA1C scores among diabetic patients
 - Improved lung function for patients with asthma
 - Improved physical activity, nutrition/eating, goal attainment, symptom management

Patient Engagement Pays Big Dividends

- Patients with low activation scores have 21% higher healthcare costs

Robert Wood Johnson Foundation

- Patients with low activation scores are readmitted 1.75x more often

Journal of Internal Medicine

- Engaged Patients have much higher rates of medication adherence

American Board of Internal Medicine

- Engaged Patients have higher levels of behavior change affecting health

Bipartisan Policy Center's Health Information Technology Initiative

Technology Also Extends Resources

Digital tools automate routine tasks and improve compliance rates

- Reminders for medication/appointment
- Educate patients about hypertension
- Address common questions
- Access to patient generated data
- Collect patient reported outcomes
- Customized care plans
- Connect to resources (mental health, \$)
- Support & motivate (gamification)



The Elephant in the (Waiting) Room



We already have a
portal for patient
engagement?



(**Sorry**, but just
because somebody
calls it engagement
doesn't mean its
actually true)

Portals are NOT Engagement Platforms

Created to support providers/health systems, not patients

- They aren't intuitive, user friendly or well designed
- Overall adoption very is low (compared to mHealth its abysmal)
- Patients use them for scheduling appointments and refilling medication
- Clearly not patient centric nor able to support wellness objectives
- Patients not entering/sharing data and outcomes
- A portal will never be a consumer's health and wellness platform

Absolutely no data demonstrating that portals improve health outcomes

Engagement is a complex science

I've Been Doing This For 20+ Years And Results Don't Come Easy

- Patient Engagement and Patient Education aren't the same
- One is passive and the other is active (education won't change PAM's)
- Engagement is purpose built to change behaviors and drive outcomes
- Success requires a long list of considerations (too many to cover all)
 - Health literacy levels
 - Communicating with multiple modalities
 - Frequency of messaging
 - Delivering content during a "teachable moment"
 - Cultural sensitivities and contributing socioeconomic factors

Patients want to be engaged in their care, but on their own terms

Understanding Where Healthcare is Headed

Beyond the obvious (improving quality and reducing costs)



Use these as a lens & filter as you explore engagement tools & opportunities

Which platform supports the future?

Patient portals

- Adoption: Low -25% of patients
- Accessed: very infrequently
- Viewed as: make appt & fill meds
- Designed For: Health Systems
- Able to Collect & Share Data: No
- Consumer Oriented: No

mHealth devices & apps

- Adoption: High- 64% use a health app
- Accessed: constantly
- Viewed as: a platform so support health
- Designed For: Individuals
- Able to Collect & Share Data: Yes
- Consumer Oriented: Yes

Patients and health systems both recognize the value of mHealth

- 71% of Patients see benefits of sharing data with their clinician
- 93% of doctors believe mHealth apps can improve patient's health
- 74% of hospitals believe it is more efficient to use mobile apps to collect patient data

The future is consumer-centric care

Healthcare Is A (Service) Business And Patients Have Choices. They Want to Be Engaged On Their Terms And Their Devices.

Will Someone Actually...

- 1) Drive to Walgreen's
- 2) Buy a Bluetooth Blood Pressure Cuff
- 3) Synchronize it with their computer
- 4) Attempt to get it reimbursed from BCBS
- 5) Check their blood pressure 3X daily
- 6) Log into MyChart and manually enter data
- 7) Repeat steps 5 & 6 for all eternity

When They Have The Option To:

- 1) Buy the new Apple watch*
- 2) Click one button (to share with my MD.)



**Healthcare has entered
the Age Of
Accountability, and...**



**Outcomes are what really
matter!**



**Clinical pathways are
evidence-based.**



**Shouldn't healthcare
technology platforms be held
to the same standards?**

About Calcium...



Engage people, enable better health decisions, and drive improved outcomes with Calcium's consumer-centric approach.



Q&A

For more info...

CalciumHealth.com

LinkedIn.com/company/calciumhealth/

Connect with me at...

LinkedIn.com/in/reynaldovillar

rey.villar@calciumhealth.com

Stop by our VBCExhibitHall.com Virtual Booth:



[Visit the Calcium Health exhibit booth](#)

Contact Us

Rey Villar

Rey.Villar@CalciumHealth.com