Do you think that prescribing Digital Health products could become as common as prescribing medications?

a. Yes, in fact more common
b. Probably
c. Never
d. I don’t know what you are talking about

The Future of Medicine

“These days I’m prescribing more apps than medications!”

Dr. Eric Topol
Chief Academic Officer at Scripps Health
Prominent cardiologist
Vice Chairman West Wireless Health Institute

- “You can take the phone and make it a lab on a chip.”
- “The Digital Revolution will create better healthcare.”
New streams are producing more data

By 2015, there will be:

- +1B smartphones
- +1B personal computers
- +400M tablets

Source(s): 2013 Rock Health: Big Data in Digital Health Report
The ‘Big Data’ Explosion

The amount of data is growing 40 TIMES faster than the world population.

Technology no longer an excuse

- 104.6% US Wireless penetration (CTIA, 2011)
- 55% Smartphones ownership, climbing @ 20%+ rate (Nielsen 2012)
- +80% of 57-88 year olds have a phone, 20-30% are smartphones (Forrester 2012)
- 44 million mHealth downloads in 2012, 142 Million in 2016 (Juniper 2012)
- 93% of physicians use mobile tech in their daily activities (HIMSS 2012)
- 19% of smartphone users have health apps (Pew Report, 2012)
- $60 billion global mHealth projection by McKinsey

Labor is no longer an answer
The Rapid Emergence of Mobile Health (mHealth)

mHealth Defined
- Decentralizing healthcare
- Empowering patients and providers

Value Proposition
- Reducing costs
- Improving quality
- Driving engagement
- Creating satisfaction
- Enhancing outcomes

Digital health funding soared in 2012 while traditional healthcare declined

YoY change in funding (2012 versus 2011)

- All sectors: -2%
- Software: +19% ($8.3B)
- Biotechnology: +46% ($1.4B)
- Medical devices: $4.5B
- Software: +19% ($8.3B)
- Biotechnology: +46% ($1.4B)
- Medical devices: $2.3B

Source(s): PwC, MoneyTree, based on TTM through Q3 2012 (latest data available)

Key mHealth User Insights
- Evenly distributed across age groups, skew towards women
- Willing to pay out of pocket
- World Wide: 75% have a phone, 25% a smartphone

More U.S. patients (90%) would take a mobile Rx from their doctor than a drug Rx (66%).

We check our phone 150x’s per day!!

Source: June 2013 Digitas Health survey
PID 201 patients with 20 different cardiac, gastrointestinal, and respiratory diseases as well as 31 720 patient insights
The mHealth product spectrum is wide; From Fitness Products to FDA Medical Devices

What Products will be FDA Regulated?

Those that use data from or control a Med Dev, or claim recommendations, analysis, or interpretations, or transform a mobile device into a Medical Device:
- e.g. prevents, diagnoses, treats, or mitigates a disease.

FDA-cleared and regulated “mobile medical devices”

- MobiUS SP1 Ultrasound
- Proteus Helius Pill Sensor
- AirStrip DB
- AliveCor ECG
Government is advancing mHealth

- NIH views mHealth as a science, holds mHealth summits
- The FDA issued guidance regulating mobile medical apps
- Aligning payment and incentives directly and indirectly (MCOT, PT/INR, Meaningful Use, ACO’s, quality, & satisfaction)
- FTC has fined and shut down mobile app manufacturers making unsubstantiated medical claims
- FCC hiring a Health Care Director to drive mHealth access, adoption, interoperability, and safety.

Affordable Care Act

- Focus on prevention
- Focus on Quality measures
- Cost pressures on providers
- Improved access to Insurance
- Demand for coordination of care

“Mobile Prescription Therapies” (MPT)

- +30,000 Health Software Applications
- ~100 FDA Cleared
- 0.3% Mobile Medical Devices
- Published Clinical Data
- <0.01% Mobile Prescription Therapies
- Rx Only
- End-to-end, integrated solution
MPT Case Study: BlueStar™

Patient therapy reimagined.

Virtual Patient Coach
Extending Treatment beyond the office visit
Personalized, Contextual, Real-time Feedback

Clinical Decision Support
Congruent Analysis
Evidence-based Recommendations
Core Platform Modules

Medication Management
- Validation
- Reconciliation
- Dosing calculation
- Titration Support
- Drug specific education

Symptom Management
- Sweating
- Nausea
- Blurred vision
- Hunger

Lifestyle Management
- Diet
- Exercise
- Sleep quality
- Social support
- Stress reduction
- Sleep quality
- Social support
- Exercise
- Diet

Physiologic Management
- Blood Glucose
- A1C
- Lab results
- Heart rate
- Weight

Clinical & Behavioral Algorithms

Educational Content

Patient-Centered Curriculum

Clinical & Behavioral Content
- Content aligns with the National Standards for Diabetes Self Management and Support and the AADE 7 Self Care Behaviors™
- Algorithm driven (medication mgmt., standards of care, lifestyle, behavior & metabolic management)
- Meets Standard 8: "Ongoing Support" of the National Standards for Diabetes Self- Management Education and Support

HCP Clinical Decision Support
What is the published evidence?

- 2.0% A1C
- 1.9% A1C

Clinical Outcomes

Hospital & ER
58%

Substantial Cost Savings

2x Medication Changes

Influencing Physician Behavior

What are people saying about it?

- 80% say “highly useful” to manage their diabetes
- 79% would continue to use
- 92% would recommend

Which Doctors will prescribe?

- 65% not in a pay-for-performance
- 90% in a pay-for-performance

Commercial Distribution Model

Physician Detailing

Patient Training

Customer Care

Patients are trained face-to-face within two weeks of prescription being dispensed.

Telephonic and online product support for Patients & Providers.

*These services come at no charge to the patient, provider, or healthplan.

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How is it dispensed and paid for?

- Dispensed nationwide via the Pharmacy
- Claims adjudicated via NDC Code through the pharmacy benefit

How do the results compare to the benefits of other prescription products?

Drugs will always be necessary, but they:

- Don’t change patient behavioral or clinical pathways
- Don’t connect patients, providers, health plans, employers, etc.
- Don’t provide real-time data/insight into patient and provider behaviors
- Don’t provide a platform to manage quality & reporting
- Don’t provide a path to “Meaningful Use” of HIT

THANK YOU!

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