

Evolving PHR Market

Analysis & Trends

Presented for HHS, AHIC Consumer Empowerment Workgroup

June 17, 2008

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Chilmark Research

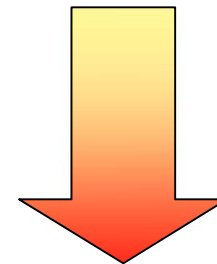
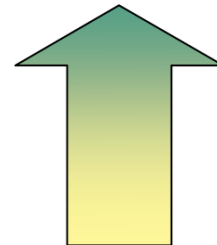
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Three Take-Aways

- ◆ **What is Market Structure Today**
- ◆ **How will Market Evolve**
 - ▲ 4 Generations
- ◆ **Trajectory**
 - ▲ Drivers
 - ▲ Challenges
 - ▲ What to Watch



PHR Market has Re-ignited



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Who is Engaging a PHR

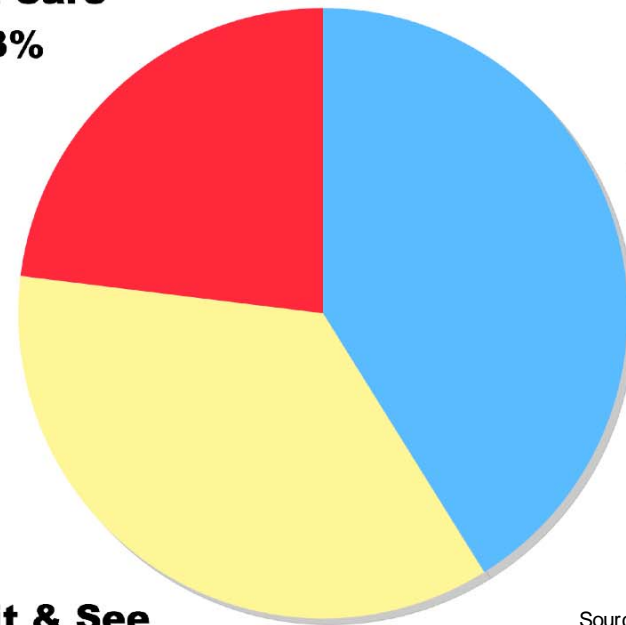
◆ **Total Adoption Today:**
~5-7%

◆ **Consumer Profile:**

- ▲ Mid to Upper Class
- ▲ Middle Aged
- ▲ Working Mothers with Medical Proxy
- ▲ Chronic Care & Web-savvy

◆ **Little Adoption Among Healthy**

Don't Care
23%



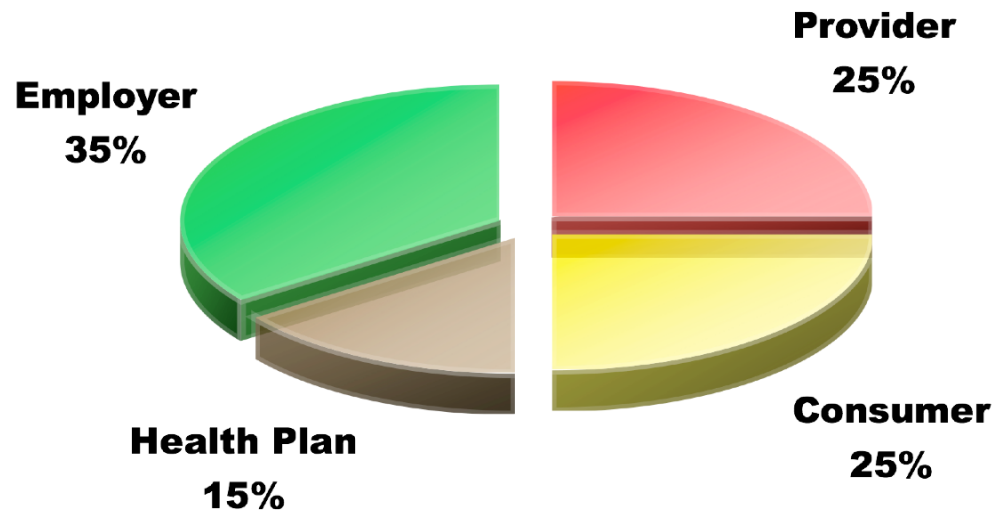
Want Tools
41%

Wait & See
36%

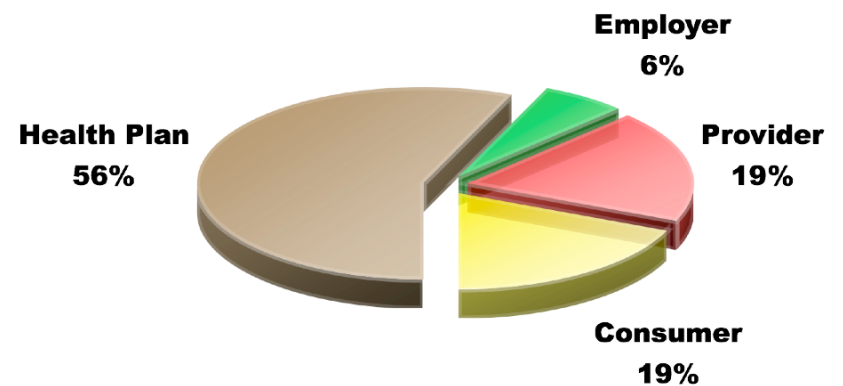
Source: Intuit Survey 2005

Financial "Skin in the Game" will Play a Large Role

Market has Moved to B2B Model



Primary Market



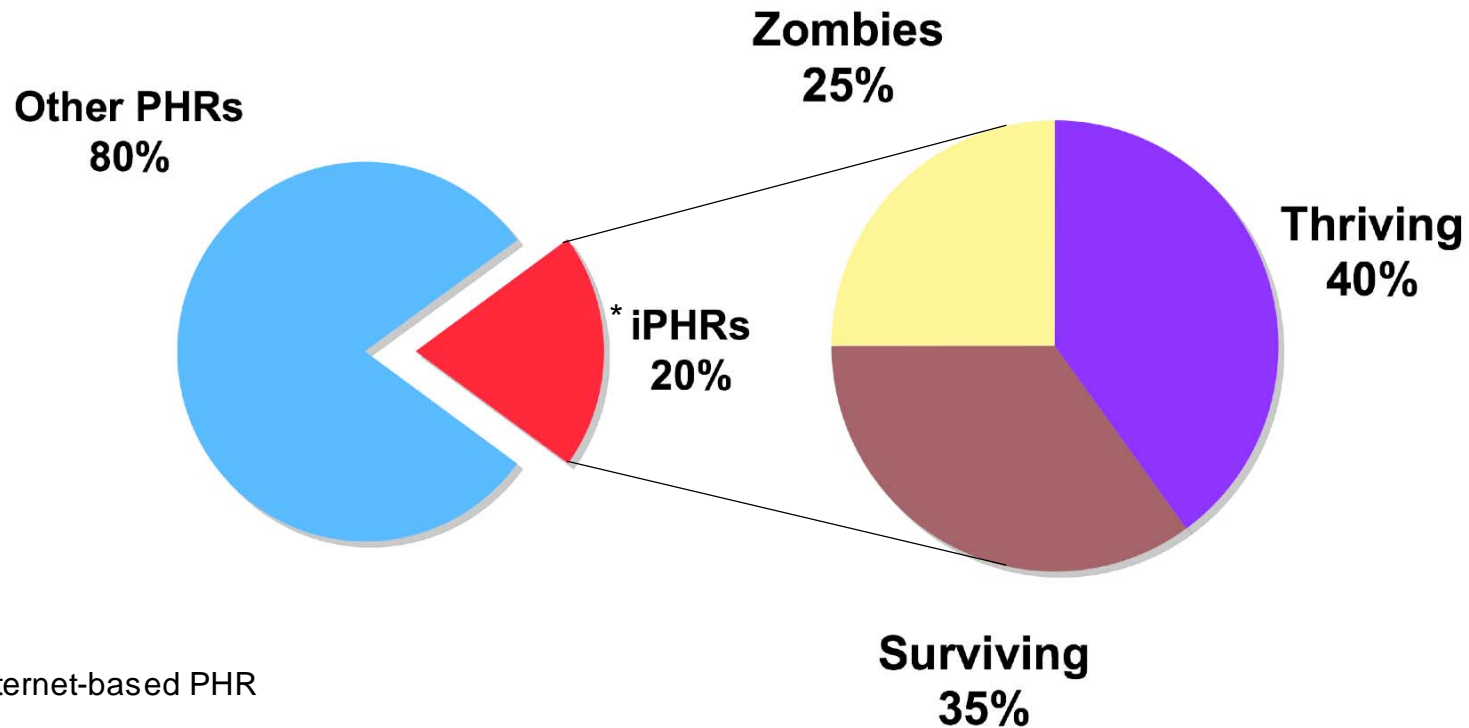
Secondary Market

- ◆ High Barriers to Entry in Provider Market
- ◆ Employer & Health Plan Markets Similar
- ◆ Consumer Plays are Often Legacy

PHR Sponsors

Sponsor	Motivation(s)	(+)	(-)
Employer	<ul style="list-style-type: none"> ◆ Lower HC costs ◆ Increase productivity ◆ Support CDHP 	<ul style="list-style-type: none"> ◆ Health & wellness ◆ Integrated to HR package ◆ Can be comprehensive 	<ul style="list-style-type: none"> ◆ Trust ◆ Incentives required ◆ Most are tethered
Health Plan	<ul style="list-style-type: none"> ◆ Lower medical losses ◆ Behavioral change ◆ Differentiator - CDHP 	<ul style="list-style-type: none"> ◆ Claims & meds ◆ HRA & PBM ◆ Domain expertise ◆ Provider info 	<ul style="list-style-type: none"> ◆ Trust ◆ Claims data not clinical ◆ Most are tethered
Provider	<ul style="list-style-type: none"> ◆ Customer retention ◆ Workflow ◆ Lower Readmissions 	<ul style="list-style-type: none"> ◆ Clinical & lab data ◆ Online consultations, scheduling, Rx refill ◆ Trust 	<ul style="list-style-type: none"> ◆ Not comprehensive ◆ Not interactive ◆ Most are tethered
Consumer	<ul style="list-style-type: none"> ◆ Chronic disease mgmt ◆ Care mgmt ◆ CDHP mgmt 	<ul style="list-style-type: none"> ◆ Motivated ◆ Personal control ◆ Portable 	<ul style="list-style-type: none"> ◆ Disconnected - self entry ◆ Low adoption ◆ Privacy & security

PHR Market is Highly Fragmented



*iPHRs: Internet-based PHR

Extremely Difficult to Choose Viable Solution

1st Generation: Isolated



- ◆ Target: End Consumer
- ◆ Most 3rd Party PHRs Stuck Here
 - ▲ 85% of those interviewed
- ◆ Adoption Remains Low
 - ▲ Generic
 - ◆ Little personalization
 - ▲ Self-entry
 - ◆ Only for *VERY* motivated

Value: Track & Manage Care

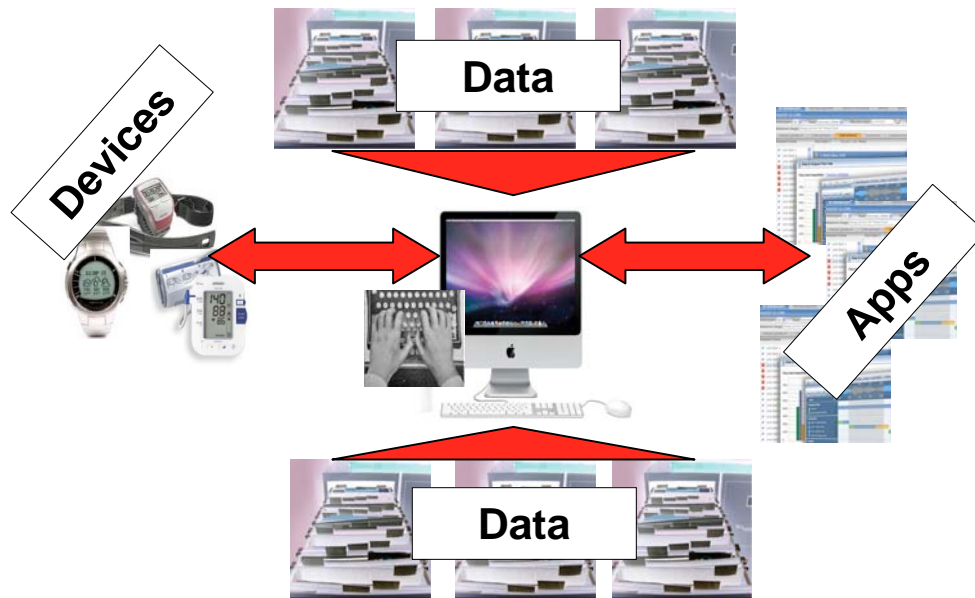
2nd Generation: Online with Some Data



- ◆ **Target: Businesses**
 - ▲ Insurers, Employers, Providers
- ◆ **Land Rush by Insurers & Employers**
 - ▲ Manage/Lower Risks
 - ◆ HRAs, Behaviors, CDHP
- ◆ **Provider Market Dominated by EMR Vendors**
 - ▲ Customer Retention
 - ◆ Communication
- ◆ **Adoption Highly Variable**
 - ▲ Trust, Perceived Value
 - ◆ Incentives often req'd
 - ▲ Some self-entry required
 - ▲ Portability?

Value: Facilitate Interaction, Promote Healthy Behavior

3rd Generation: Highly Networked Utility

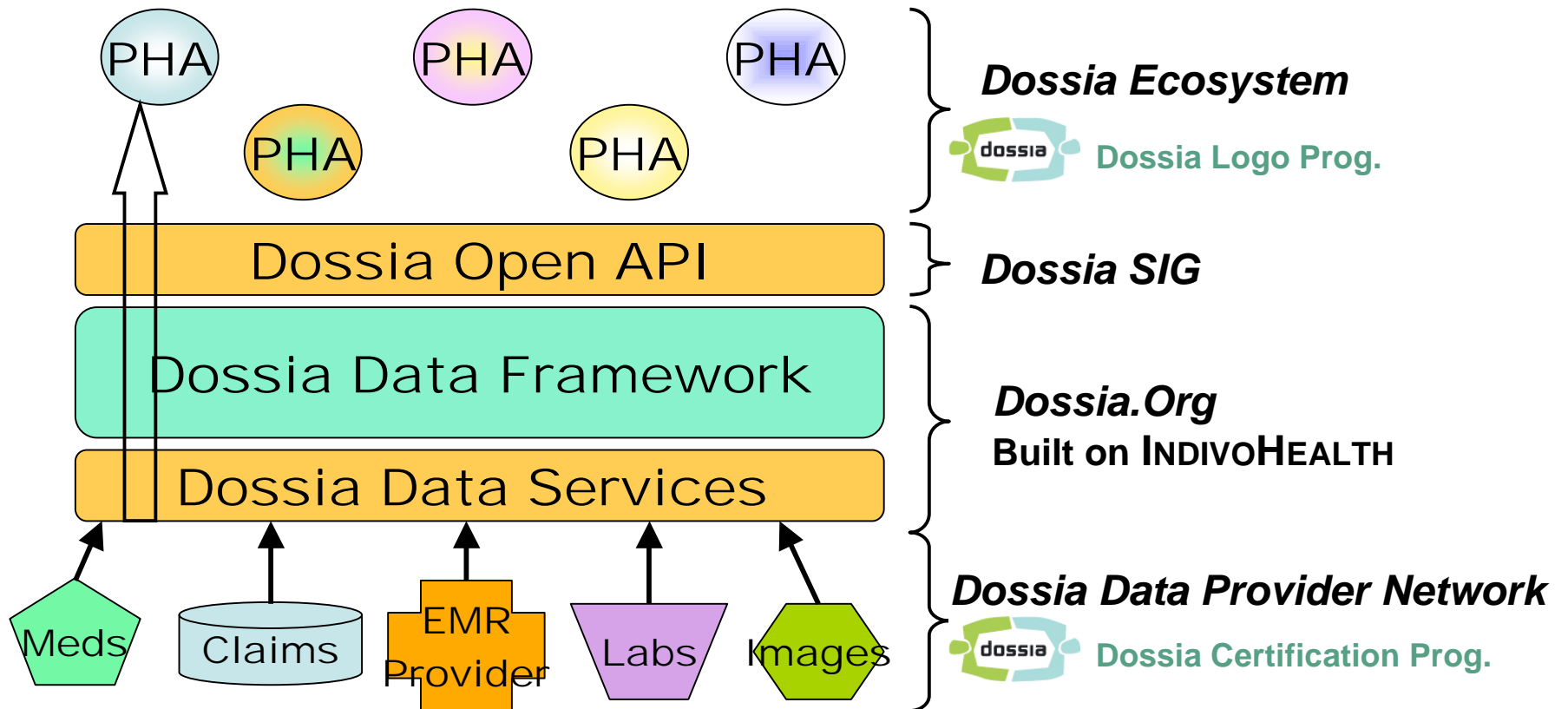


***Not a PHR, but a Platform:
Personal Health System (PHS)***

- ◆ **Target: Consumers**
 - ▲ Exception - Dossia
- ◆ **Three Dominant Players**
 - ▲ Dossia, Google, HealthVault
- ◆ **Utility Service Model**
 - ▲ Perform Heavy Lifting
 - ◆ **Data Repository**
 - ▲ Multiple sources
 - ▲ Identification Mgmt
 - ▲ Security/Privacy
- ◆ **Market Contraction**
 - ▲ Accelerate Demise of Weak
- ◆ **Adoption Unknown**
 - ▲ Can They Get the Data?
 - ▲ Can They Build an Ecosystem?
 - ▲ Trust, Value

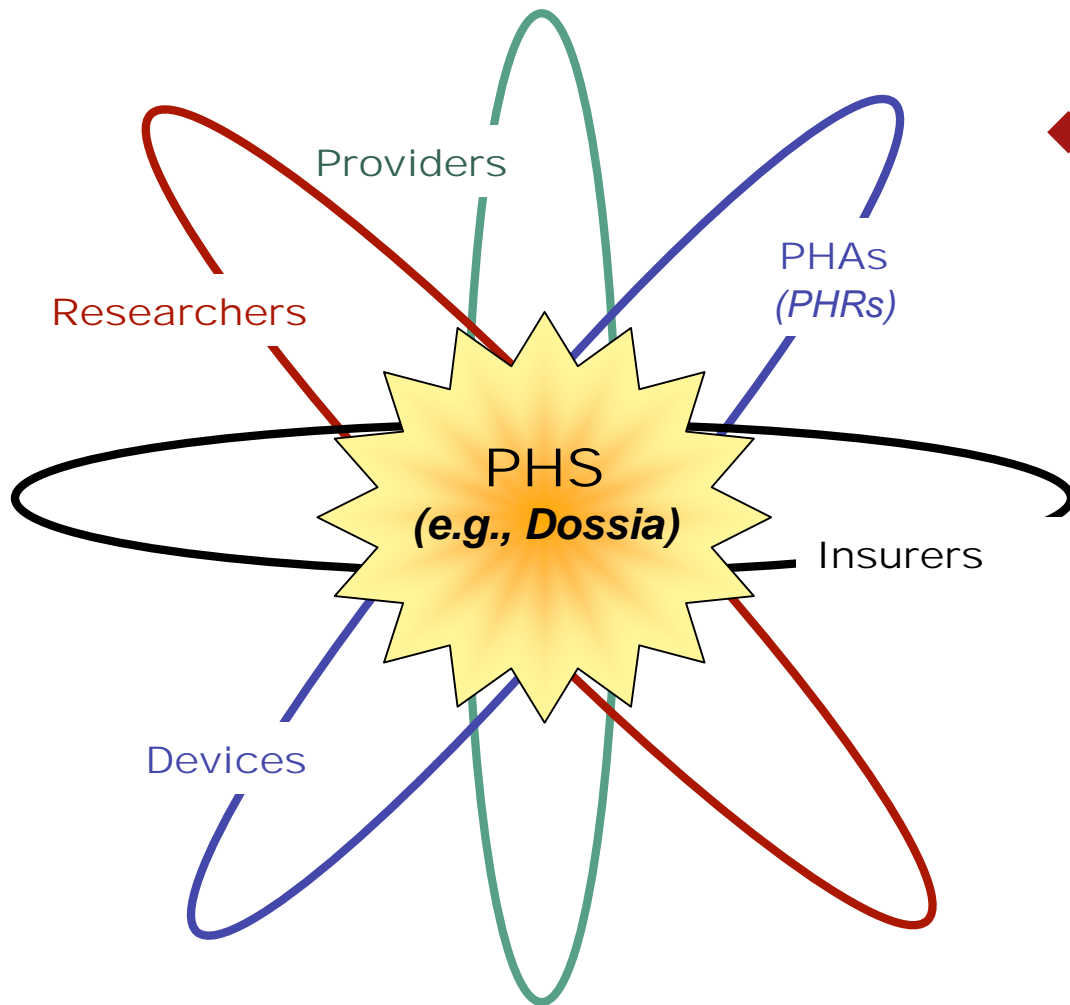
Value: Richer Data = Richer Experience

Dossia's Utility Model



Google Health & HealthVault have Similar Models

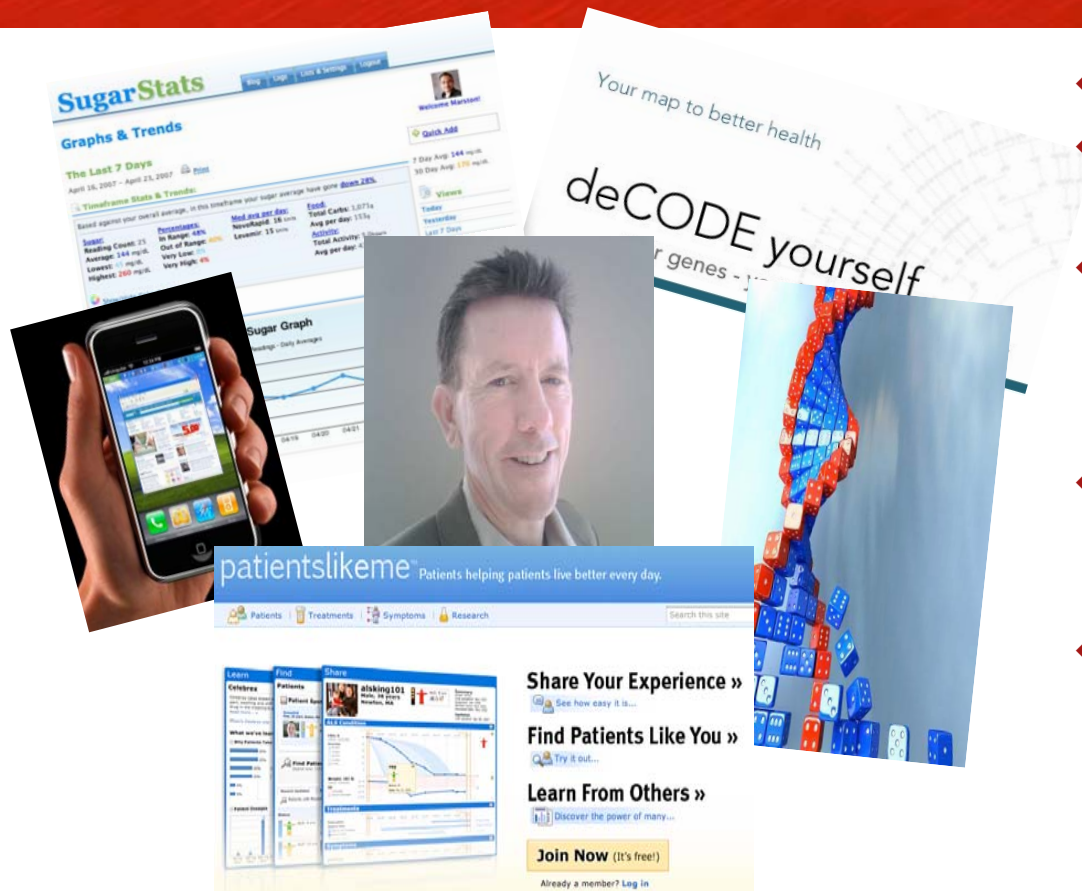
Successful (PHSs) Will Evolve Into Ecosystems



◆ If Successful...

- ▲ Data Consolidation
 - ◆ Data liquidity
- ▲ Unmatched Richness
- ▲ Game Changing
- ▲ Consumer Empowering

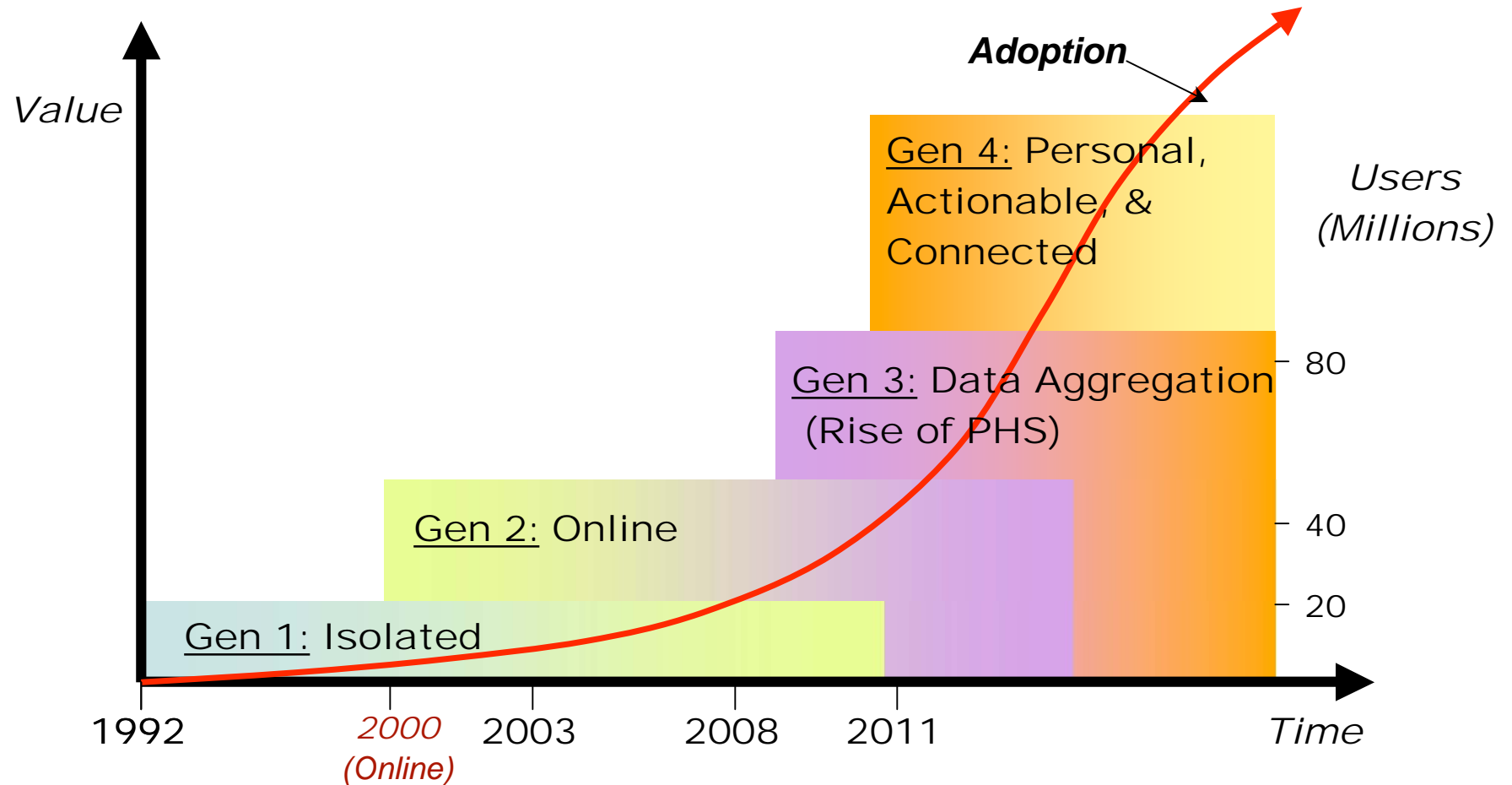
4th Generation: Personal, Actionable, Connected



- ◆ **Target: All Markets**
- ◆ **Leverage Utility Services**
 - ▲ Now that we have the data...
- ◆ **Market Fragmentation**
 - ▲ Proliferation of Apps & Widgets
 - ◆ Serve highly individual needs
 - ◆ Enable personalized medicine
- ◆ **Seamless Integration**
 - ▲ "SPIIME"
 - ◆ Always on
- ◆ **Adoption Predicated On...**
 - ▲ Liquid Data
 - ◆ Success of ecosystems
 - ▲ Consumer Value

Value: About Me, By Me, With Me, For Me

PHR Evolution Accelerates Adoption

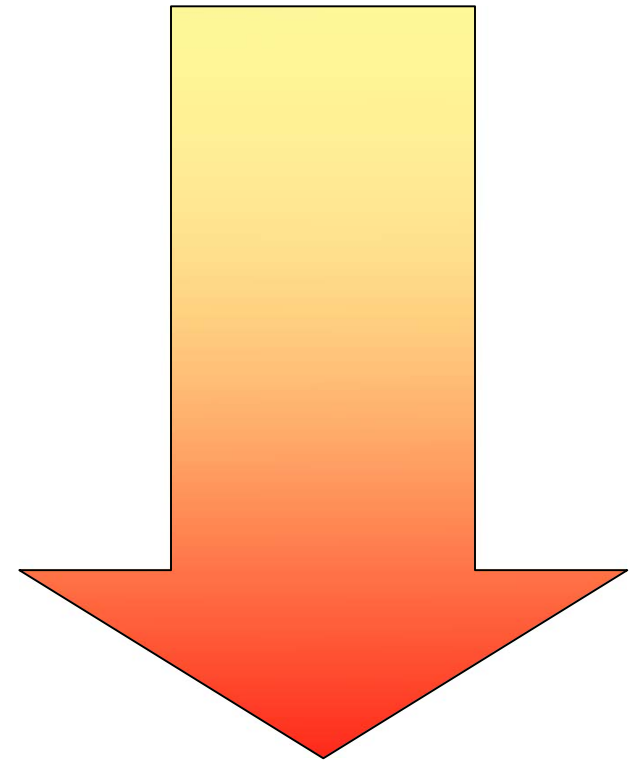


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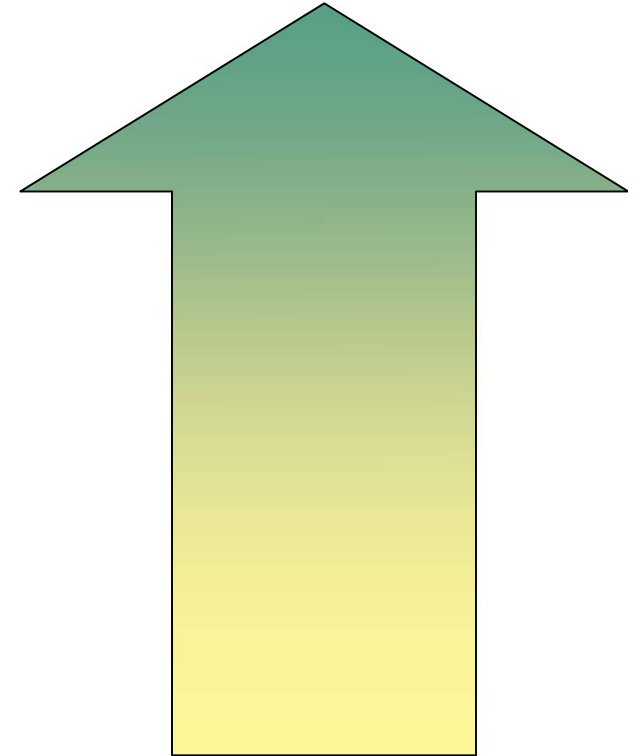
Moving Ahead: Adoption Challenges Remain

- ◆ **Data Liquidity**
 - ▲ EMR adoption
 - ▲ Standards Adoption
 - ▲ Policies & Incentives
 - ◆ **Portability**
- ◆ **Trust**
 - ▲ Health Plan, Employer, 3rd Party
- ◆ **Consumer Apathy/Indifference**
 - ▲ Education
 - ▲ Incentives
- ◆ **Solution Capabilities**
 - ▲ Immature, Disparate



Drivers to Overcome Challenges

- ◆ **Accelerating, Employer-led Initiatives**
 - ▲ Financial Skin
- ◆ **Consumerism Entering Healthcare**
 - ▲ Visibility, Education
- ◆ **Accelerating IT Adoption Among Providers**
 - ▲ E-Consultations
- ◆ **New Consumer-centric Technologies & Tools**
 - ▲ Delivering Radically New Capabilities
- ◆ **Disintermediation of Care**
 - ▲ Retail Clinics, Med Tourism, etc.



Will Consumer Drive Needed Change?

What to Watch

- ◆ **Traction of Platform Plays**
 - ▲ Data Sources (agreements)
 - ◆ E.g., Cleveland-Google, KP-MS
 - ▲ Consumer Adoption
 - ◆ **Sub-group types**
 - ▲ Developer Adoption
 - ◆ **Popular apps/services**
- ◆ **Market Consolidation**
 - ▲ Rationalization
 - ▲ Acquisitions
- ◆ **Employer Successes**
 - ▲ Demonstrable ROI



The world is moving so fast these days that the one who says it can't be done is generally interrupted by someone doing it.

- Harry Emerson Fosdick