

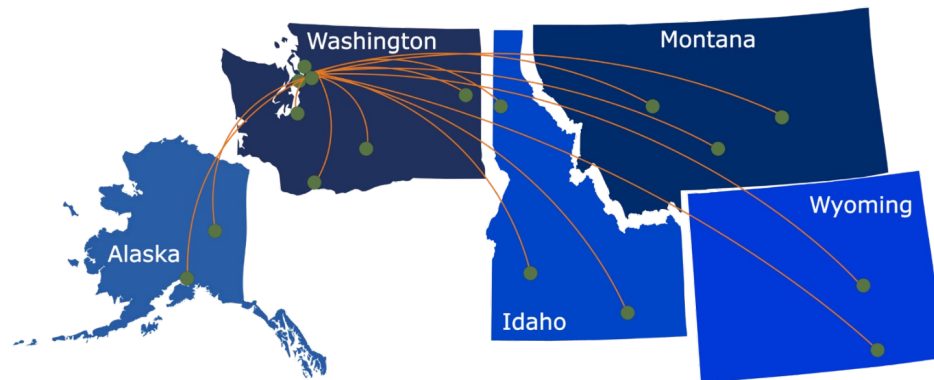
Career Development Series 2024

The Entrepreneur's Perspective on Telemedicine Technology and Tools Development



ITHS

Institute of Translational Health Sciences
ACCELERATING RESEARCH. IMPROVING HEALTH.



What We Offer:

- 1 Research Support Services:** Members gain access to the different research services, resources, and tools offered by ITHS, including the ITHS Research Navigator.
- 2 Community Engagement:** Members can connect with regional and community based practice networks
- 3 Education & Training:** Members can access a variety of workforce development and mentoring programs and apply for formal training programs.
- 4 Funding:** Members can apply for local and national pilot grants and other funding opportunities. ITHS also offers letters of support for grant submissions.

Feedback

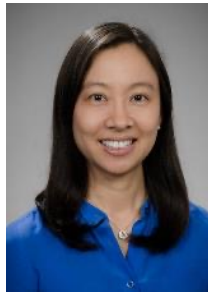
At the end of the seminar, a link to the feedback survey will be sent to the email address you used to register.

Career Development Series 2024

The Entrepreneur's Perspective on Telemedicine Technology and Tools Development

Telemedicine 2.0 Series: Session 5

**Cindy Lin,
MD, FACSM, FAAPMR**



**Terri Butler,
PhD**



**Teddy Johnson,
PE, MBA**



Presented by:

Disclosures

Teddy Johnson has a financial relationship with Oncodisc, Inc. presented in the following slides.

Dr. Lin is a medical advisor for OpenEvidence.

Telemedicine 2.0 Series

Date	Session	Title
	Session 1	Telemedicine 2.0: How Is It Relevant to Me? <i>(Pre-recorded video available)</i>
Sept. 25, 2024	Session 2	Telehealth Then and Now
Oct. 1, 2024	Session 3	Telemedicine Regulatory Issues: Licensing, Standards of Practice, Billing, and Reimbursement
Oct. 8, 2024	Session 4	Protecting Privacy and Maintaining Security in Telemedicine
Oct. 15, 2024	Session 5	The Entrepreneur's Perspective on Telemedicine Technology and Tools Development
Oct. 24, 2024	Session 6	Digital Inclusion and Access to Care by Telemedicine

More details at: https://www.iths.org/event/telemedicine-then-and-now/?instance_id=1372

Learning Objectives

At the end of the session, participants will be able to:

- 1** Identify new product needs from patient and provider experiences
- 2** Appreciate the health care capabilities of sensor integration into consumer products and medical devices
- 3** Understand how integrated systems are used in telehealth applications

Career Development Series 2024

Overview

Terri Butler, PhD

ITHS

Digital Health Drivers

Big bucks are at stake →

Improve financial processes in healthcare.

Long wait times to see clinicians →

Improve efficiency and experience.

Underinsured and remote locations →

Increase access to care.

Tools to assist clinicians →

Better care, avoiding errors.

Patient self-care →

Chronic disease management, wellness.

Digital Health Funding (as of mid-year 2024)

U.S. DIGITAL HEALTH FUNDING AND DEAL SIZE
2014-H1 2024



Source: Rock Health Digital Health Venture Funding Database; includes U.S. deals >\$2M; data through June 30, 2024

©2024 Rock Health

Top Value Propositions and Clinical Indications

LEADING VALUE PROPOSITIONS AND CLINICAL INDICATIONS



TOP FUNDED VALUE PROPOSITIONS

2020-H1 2024; integers equate to funding rank

Treatment of Disease

	2020	2021	2022	2023	H1 2024
TREATMENT OF DISEASE	\$2.1B 3	\$5.0B 3	\$2.1B 5	\$1.9B 1	\$1.1B 1
NONCLINICAL WORKFLOW	\$1.3B 8	\$3.1B 7	\$2.5B 3	\$1.9B 2	\$0.9B 2
RESEARCH & DEVELOPMENT	\$2.2B 2	\$5.6B 1	\$2.6B 1	\$1.3B 5	\$0.7B 3
CLINICAL WORKFLOW	\$1.0B 10	\$1.8B 12	\$1.4B 10	\$0.7B 14	\$0.6B 4
ON-DEMAND HEALTHCARE	\$3.0B 1	\$5.4B 2	\$2.5B 2	\$0.8B 9	\$0.6B 5
CDS & PRECISION MEDICINE	\$1.3B 7	\$1.6B 14	\$1.4B 9	\$0.8B 12	\$0.6B 6

TOP FUNDED CLINICAL INDICATIONS

2020-H1 2024; integers equate to funding rank

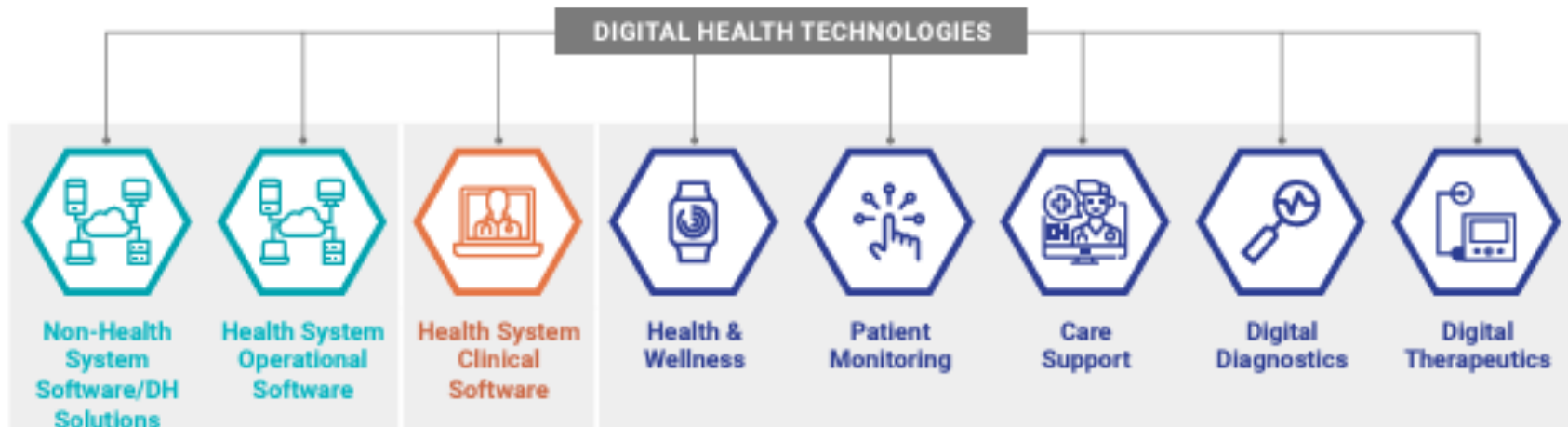
Mental Health

	2020	2021	2022	2023	H1 2024
MENTAL HEALTH	\$2.4B 1	\$4.9B 1	\$2.1B 1	\$1.1B 1	\$0.7B 1
CARDIO-VASCULAR	\$1.3B 4	\$2.0B 3	\$1.2B 3	\$0.6B 3	\$0.3B 2
ONCOLOGY	\$1.3B 3	\$1.5B 7	\$1.3B 2	\$0.5B 4	\$0.3B 3
WEIGHT MANAGEMENT & OBESITY	\$0.9B 5	\$2.2B 2	\$0.6B 8	\$0.3B 8	\$0.3B 4
REPRODUCTIVE & MATERNAL HEALTH	\$0.8B 8	\$1.9B 4	\$0.8B 5	\$0.2B 14	\$0.2B 5
NEUROLOGY	\$0.3B 16	\$1.0B 10	\$0.5B 9	\$0.4B 5	\$0.2B 6

Note: Companies can be tagged with multiple value propositions and clinical indications; Rock Health tracks 20 value propositions and 23 clinical indications; box colors correspond to the funding rank of the value proposition and clinical indication each year; the light grey applies to any funding rank greater than six
Source: Rock Health Digital Health Venture Funding Database; includes U.S. deals >\$2M; data through June 30, 2024

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Digital Health Categories



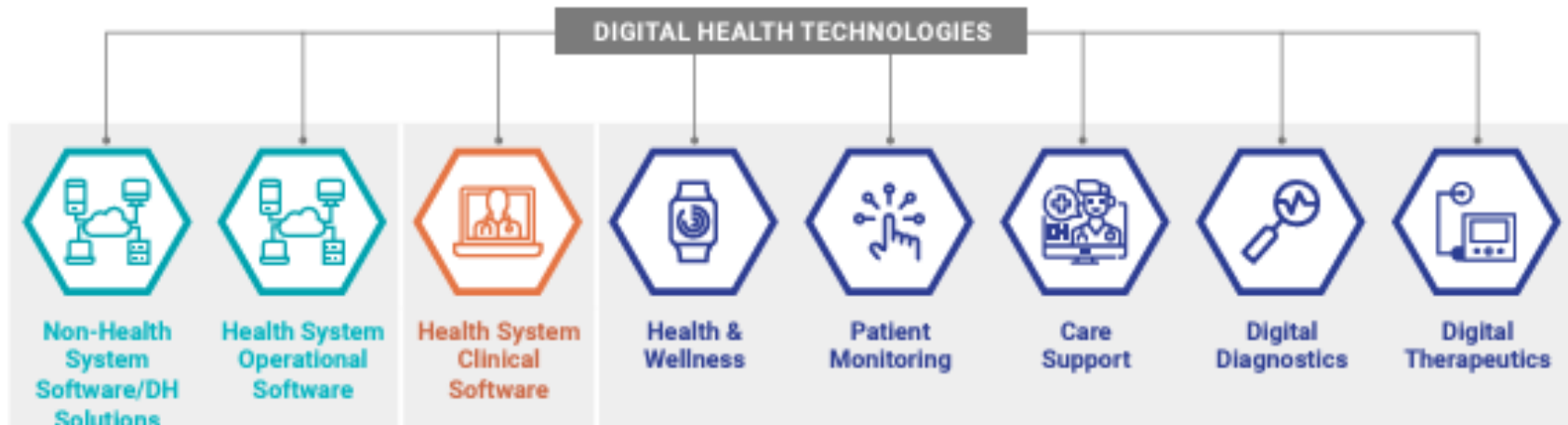
Noom person diet tracking	CodaMetrix automated medical coding	Abridge automating medical records	Maven digital services for underserved women & families	Omada diabetes monitoring	Summer Health pediatrics connections	AliveCor heart monitor	Akili EndeavorRx ADHD
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Examples of Companies

- **Zephyr AI** - \$111M
 - Data platform for clinical development, biomarkers identify patients for precision medicine.
- **Allez Health** - \$60M
 - Glucose monitoring, biometric sensor platform, multiple health applications.
- **Fabric Healthcare** - \$60M
 - AI-powered care enablement company, digital front door, intake, triage, virtual care, for health systems, ambulatory clinics.
- **Foodsmart** - \$1.1B total
 - Food as medicine for chronic condition care like cholesterol, diabetes, hypertension, weight loss, telehealth with dietitians, digital meal planning and grocery delivery. Customers are individuals and organizations like employers and health plans, Medicare and Medicaid.

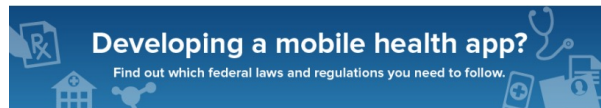
Rock Health <https://rockhealth.com/insights/h1-2024-digital-health-funding-resilience-leads-to-brilliance/>

Digital Health Categories



FDA Regulatory Requirements

FDA Digital Health Center of Excellence



Produced in cooperation with the U.S. Department of Health & Human Services (HHS); the Office of the National Coordinator for Health Information Technology (ONC), the Office for Civil Rights (OCR), and the Food and Drug Administration (FDA)



- <https://www.fda.gov/medical-devices/digital-health-center-excellence>
- <https://www.ftc.gov/business-guidance/resources/mobile-health-apps-interactive-tool>

Computing platforms, connectivity, software, and sensors [used] for health care and related uses.

FDA is committed to supporting digital health technology.

- Guidance for development
- Connecting stakeholders
- Advancing regulatory approaches

Other government agency's rules may apply:

- Federal Trade Commission
- Office of the National Health Information Coordinator
- Office for Civil Rights

FDA Umbrella

FDA's focus on digital health is on uses defined as “medical devices.”

- **A medical device** is an instrument, machine, or other tool used to prevent, diagnose, or treat disease or other conditions. Medical devices can also be used to detect, measure, restore, correct, or modify the structure or function of the body. <https://www.fda.gov/medical-devices/classify-your-medical-device/how-determine-if-your-product-medical-device>
 - **Software as a Medical Device (SaMD)**
 - **Artificial Intelligence and Machine Learning in Software as a Medical Device**
 - **Cybersecurity**
 - **Device Software Functions including Mobile Medical Applications**
 - **Health IT**
 - **Medical Device Data Systems**
 - **Medical Device Interoperability**
 - **Telemedicine**
 - **Wireless Medical Devices**
- <https://www.fda.gov/medical-devices/classify-your-medical-device/how-determine-if-your-product-medical-device>
- <https://www.fda.gov/medical-devices/digital-health-center-excellence/what-digital-health#focus>

Digital Therapeutics

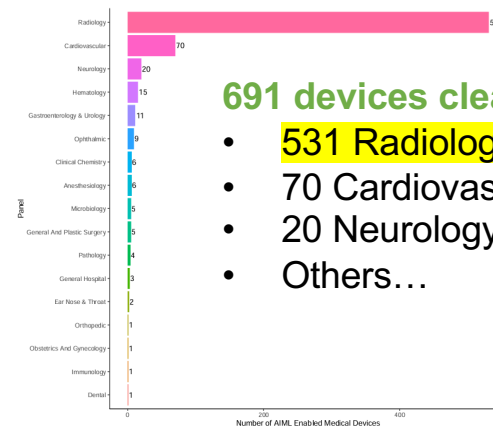
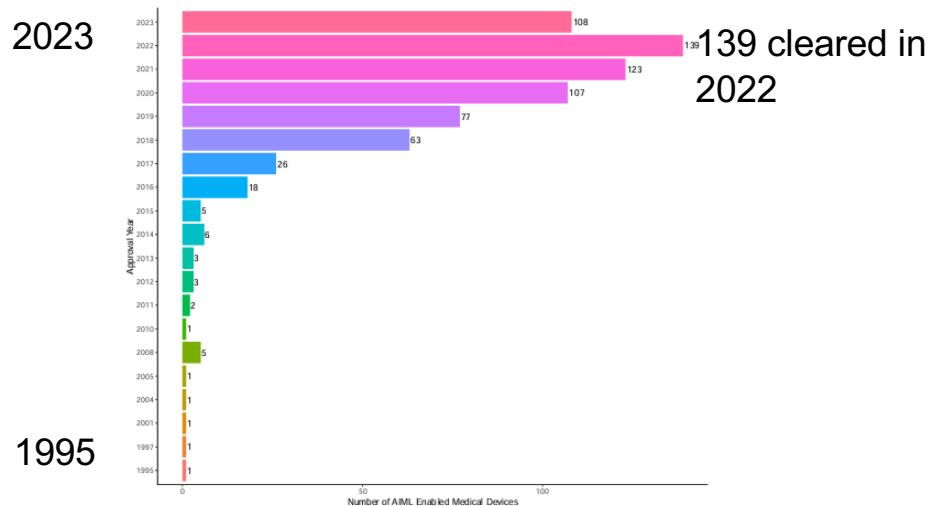
Digital Therapeutics (DTx) are

- **health software**
- **intended to treat or alleviate a disease, disorder, condition, or injury**
- **by generating and delivering a medical intervention**
- **that has a demonstrable positive therapeutic impact on a patient's health.**

Digital Therapeutics Alliance, <https://dtxalliance.org/>

FDA AI/ML Clearance Trends

FDA-Approved Artificial Intelligence and Machine Learning (AI/ML)-Enabled Medical Devices: An Updated Landscape



691 devices cleared as of Oct 2023

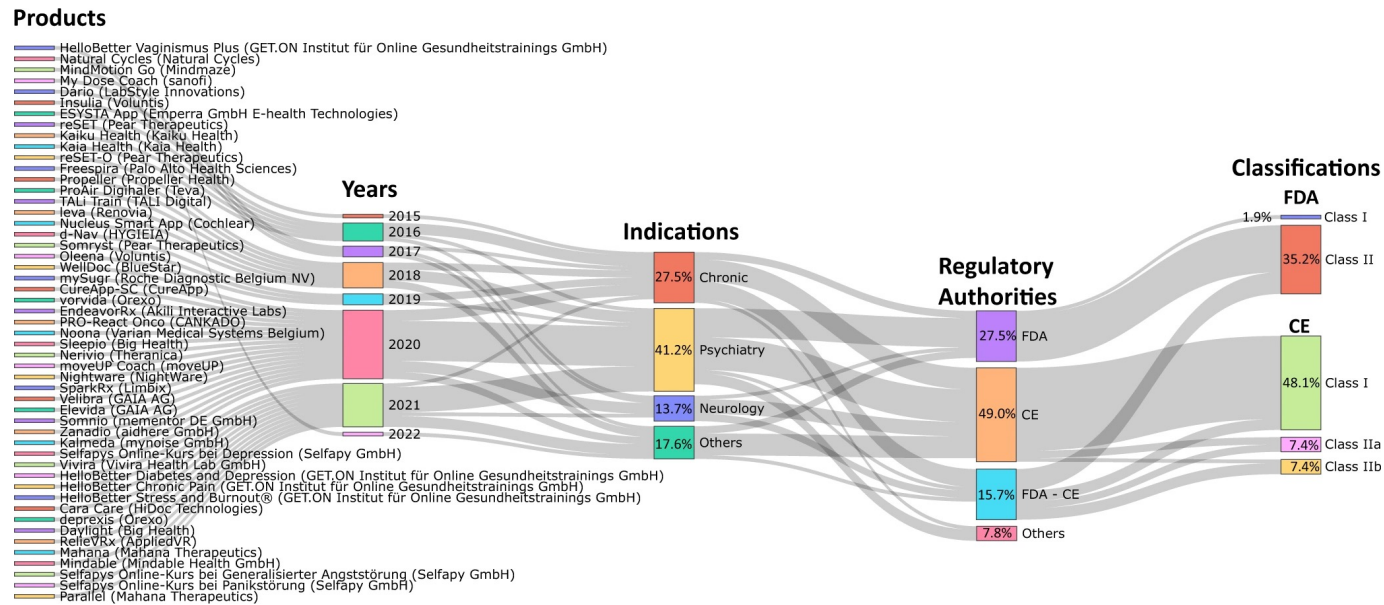
- 531 Radiology
- 70 Cardiovascular
- 20 Neurology
- Others...

Figure 2. Graphical representation of the annual trends in FDA approval for AI/ML-enabled medical devices showcasing the surge in technological integration in healthcare.

Joshi, G. et. al. *Electronics* 2024, 13, 498. <https://doi.org/10.3390/electronics13030498>

Digital Therapeutics Clearance Trends

Digital Therapeutics from Bench to Bedside



Wang, C., Lee, C. & Shin, H. Digital therapeutics from bench to bedside. *npj Digit. Med.* 6, 38 (2023).
<https://doi.org/10.1038/s41746-023-00777-z>

Digital Therapeutics Clinical Trials

ClinicalTrials.gov

- **80 studies underway** (search “digital therapeutics”)
- 79% are randomized controlled trials
- Most are smartphone or web-based, some include games and virtual reality
- Different countries → different regulations

Disease Indications:

- Chronic disease management, e.g. diabetes, asthma, chronic pain, heart disease
 - Drug abuse prevention, alcoholism, smoking cessation
 - Sleep management, insomnia
 - Psychological or psychiatric disease management, e.g. anxiety, depression, schizophrenia, PTSD, ADHD
 - Clinical applications such as tumors, cranial nerve, obstetrics, urinary system, digestive system, orthopedic applications, respiratory system, immune system, multiple sclerosis.
- Wang, C., Lee, C. & Shin, H. *Digital therapeutics from bench to bedside. npj Digit. Med.* 6, 38 (2023).
<https://doi.org/10.1038/s41746-023-00777-z>
- <https://clinicaltrials.gov/search?term=%22digital%20therapeutics%22&viewType=Table>

ADDITIONAL QUESTIONS?

- Digital Health tools are playing a significant role in healthcare transformation.
- Regulatory authorities are supportive of new technologies and are providing efficacy and safety study guidance and stakeholder connections.
- Investors continue to support new companies that have business models that fit health system operations and patient needs.

The Entrepreneur's Perspective on Telemedicine Technology and Tools Development

Cindy Lin, MD, FAAPMR, FACSM

Clinical Professor, Sports & Spine Medicine,
University of Washington Medical Center
Endowed Professorship in Sports and Exercise Medicine
Director of Clinical Innovation, The Sports Institute

October 15th, 2024

EXERXO

Lecture Objectives

ExerciseRx as a case example:

1. Patient and provider experiences with identifying needs gaps through UI/UX research
2. Integrating new digital health tools to patient care flow in clinical setting, challenges and opportunities
3. Assessing patient and provider satisfaction with new digital health tools

Physical Activity is Mostly left out of Healthcare



80% of Americans do not meet U.S. National Physical Activity Guidelines. **More than 50%** of Americans have a preventable chronic disease; many associated with lifestyle factors



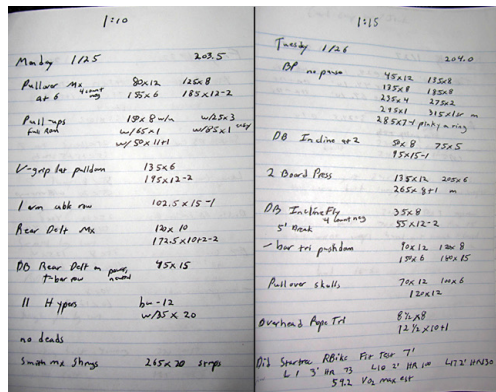
Patient physical activity is largely **self-reported**, which can be inaccurate and difficult to interpret in the healthcare setting



Despite the **increase in wearables and digital health**, they are not being used as a routine part of clinical practice

CURRENT STATE: How Patients Share Physical Activity Data with Healthcare Providers

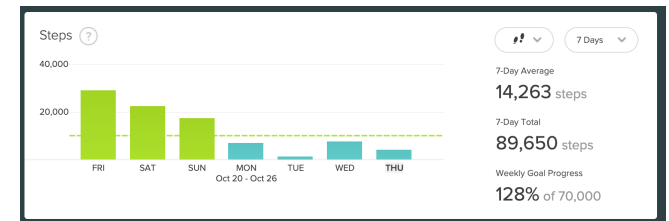
Paper-Based Logs



Self-Report



Wearables, Smartphone Activity Metrics

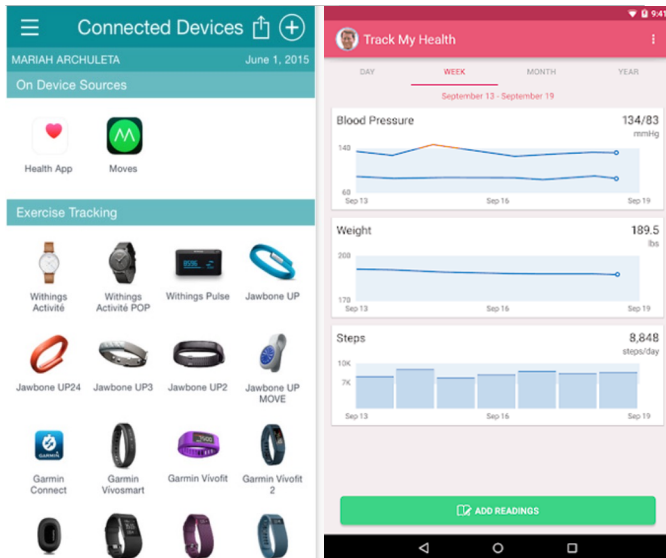


TECH

Doctors say most metrics provided by your Apple Watch, Fitbit aren't helpful to them

Dalvin Brown USA TODAY

Published 5:04 a.m. ET Aug. 14, 2019 | Updated 2:17 p.m. ET Aug. 14, 2019



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& SPORTS MEDICINE

Challenges Digital Health Data in Clinical Practice

- Electronic health records data overload & provider burnout
- Reimbursement challenges and limited support for care teams to interpret and act on data
- Uncertainty about what data means, accuracy & liability concerns

www.imedicalapps.com/2015/11/app-wearables-electronic-health-record/



UW Medicine

EXERCISE

Current State: Electronic Health Records Inbasket Overload

Adding a digital health metric introduces another inbasket to check on top of 10+ inbaskets to review daily

My Messages

New Msg Patient Msg Refresh E Pools Settings Search Manage QuickActions Attach Out Properties

My Messages

Results (198)

Rx Request

Chart Completion (79)

Canceled Ord (56)

Patient Calls (2)

Patient Call Back

My Incomplete Notes (11)

My Open Charts (52)

My Open Encounters (312)

Cosign - Chart

Cosign Notes

Staff Message

CC'd Charts

Letter Queue (27)

Unsent Letters (2)

Pt Questionnaire (14)

Anticoagulation Enrollment

Cardiology

Cosign - Orders (15)

Rx Request 0 unread, 6 total

Status	Enc Date & Time	Provider	Patient	Controlled?
Per	10/28/2014 3:06 PM	Gazewood, John	Orsolini, Mary	
Medication: albuterol (VENTOLIN HFA, PROAIR HFA) 108 (90 BASE) MCG/ACT inhaler				
Last Accessed: UVA, LIP AMBIP				
Sent By: Lip Ambip Uva, MD				
Pool: Open?: Open				
Per	06/06/2014 2:08 PM	Uva Amb, Rn	Lemieux, Doggie	
Last Accessed: UVA, LIP AMBIP				
Sent By: Rn Uva Amb, RN				
Pool: Open?: Open				
Per	06/24/2013 12:47 PM	Uva Amb, Rn	Matters, Joanne	X
Last Accessed: UVA, LIP AMBIP				
Sent By: Rn Uva Amb, RN				
Pool: X				
Open?: Open				
Msg/Note: Need more meds please				
Per	06/24/2013 12:35 PM	Uva, Lip Ambip	Finch, Scout	
Last Accessed: UVA, LIP AMBIP				
Sent By: Front Desk Uva Amb				
Pool: X				
Open?: Open				
Per	04/24/2013 1:48 PM	Lepsch, Mark A	Stolldorf, Tim	
Medication: lisinopril (PRINIVIL; ZESTRIL) 10 MG tablet [Pharmacy Med Name: lisinopril (PRINIVIL, ZESTRIL)...				
Last Accessed: UVA, LIP AMBIP				
Sent By: Surescripts In Edi				
Pool: X				
Per	04/18/2013 3:35 PM	Uva, Lip Ambip	Stolldorf, Tim	
Medication: lisinopril (PRINIVIL; ZESTRIL) 10 MG tablet [Pharmacy Med Name: lisinopril (PRINIVIL, ZESTRIL)...				
Last Accessed: UVA, LIP AMBIP				
Sent By: Surescripts In Edi				
Pool: X				
Open?: Open				

You have taken the baton (Click to put back)

- + Work Taken By You (Click icon to put back)
- ? Work Assigned To Your Pool (Click icon to take)
- Work Taken By Others (Click icon to take)

Image credit: 2015 amb general updates (virginia.edu)

EXERCISE

ExerciseRx Team



ubicomplab



Samuel R. Browd, MD, PhD
Director

- Professor of Neurological Surgery, UW
- Pediatric Neurosurgeon, Seattle Children's Hospital



Cindy Lin, MD
Director of Clinical Innovation

- Clinical Professor of Sports & Spine Medicine
- Endowed Professorship Sports and Exercise Medicine



Karla Landis, MS
Associate Director

- Chief strategist and head of operations
- Capacity building



Shwetak Patel, PhD
Endowed Professor

- Washington Research Foundation Endowed Professor
- Paul G. Allen School of Computer Science & Engineering



Otari Ioseliani, MS
Software Engineer

- Paul G. Allen School of Computer Science & Engineering, Electrical & Computer Engineering, Ubiquitous Computing Lab



Sean A. Munson, PhD
Associate Professor

- Human Centered Design & Engineering
- HCDE PhD program director



Richard Li, MS
Engineer

- PhD Candidate, Paul G. Allen School of Computer Science & Engineering, Electrical & Computer Engineering, Ubiquitous Computing Lab



Kristen Gustafson

- Engineering Student Assistant
- Computer Science & Engineering Major

EXERCISE

Barriers to Physical Activity Support for Patients in Healthcare Setting

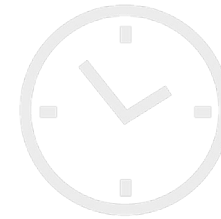


Lack of pragmatic solutions for patients who cannot afford gyms, personal trainers, wearables

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Patients want personalized guidance on what exercises are safe and effective for their medical conditions



Clinicians are unable to provide personalized, ongoing support due to time, knowledge, and resource constraints

UI/UX Research: Patient Voices

50+ patients from diverse backgrounds and medical conditions participated in UI/UX interviews as part of IRB approved research and HCDE Capstone project:

Key takeaways

- Personalized activity goal
- Meaningful connection to provider

“ Anything **coming from my provider means more to me**; it feels personal.

“ If I was doing the exercises and doing them right and doing a good job, I would appreciate Dr. XX reviewing them and being aware.

“ When go to a PT appointment, you're given a piece of paper, and you have to rely on their stick drawings for what it looks like.”

UI/UX Research: Healthcare Providers

30+ healthcare providers participated in interviews:

Primary Care
Family Medicine
Cardiology
Diabetes Specialists
Oncologists
Orthopedic Surgeons
Weight management
Rehabilitation medicine
Integrative Medicine
Pain Medicine
Sports Medicine
Adult & Pediatric Physical Therapists
Registered Dieticians

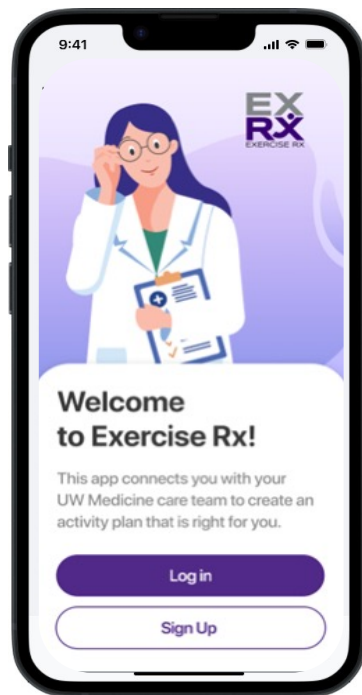
I would absolutely prescribe this to patients. I would especially use it to assess how they've done in the interim. It would be helpful for that conversation during their next visit, and about discussing the barriers to improve.
- Physician, Pain Medicine

This could be helpful in changing patient behavior. Whatever is measured tends to improve and having external motivation - like somebody helping to track that - can be helpful.
- Physician, Multiple Sclerosis Center

Key factors for adoption

- EHR integration
- Light touch for providers

Version 1 Patient App: Started Out Simple Wellness Support



**Only +1,000
steps/day**

Associated with
28% decrease in all-
cause mortality in
older adults¹;
reduces frailty²;
lowers heart
disease & mortality³

1. Nystoriak MA, Bhatnagar A. Cardiovascular Effects and Benefits of Exercise. *Front Cardiovasc Med.* 2018;5:135. Published 2018 Sep 28. doi:10.3389/fcvm.2018.00135
2. Chaudhry UAR, Wahlich C, Fortescue R, Cook DG, Knightly R, Harris T. The effects of step-count monitoring interventions on physical activity: systematic review and meta-analysis of community-based randomised controlled trials in adults. *Int J Behav Nutr Phys Act.* 2020;17(1):129. Published 2020 Oct 9. doi:10.1186/s12966-020-01020-8
3. Shcherbina A, Hershman SG, Lazzeroni L, et al. The effect of digital physical activity interventions on daily step count: a randomised controlled crossover substudy of the MyHeart Counts Cardiovascular Health Study. *Lancet Digit Health.* 2019;1(7):e344-e352. doi:10.1016/S2589-7500(19)30129-3

EXERCISE

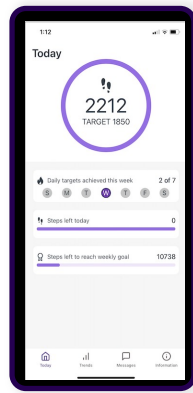
ExerciseRx Version 2.0

Patient App

Physical Activity Data Capture



Home Exercise Sensing



Provider Dashboard

Clinically Relevant PA Data Integration



Epic

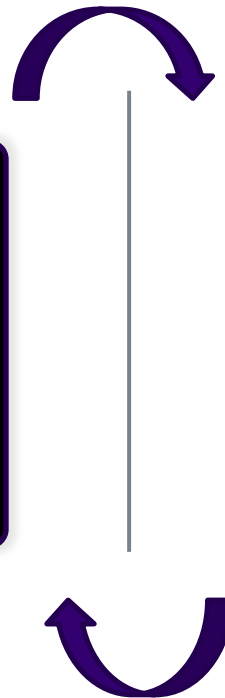
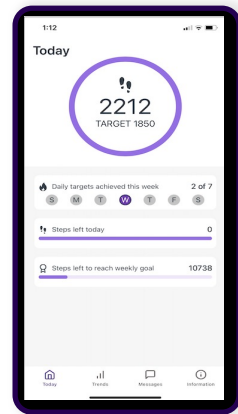


Triage and support

EXERCISE

ExerciseRX Supports Physical Activity without Burdening Providers

Activity progression based on behavior change research that emphasizes incremental change and building on successes



Physical activity profile for each patient

Seamless integration with providers' workflow

ExerciseRx Clinical Pilot Study Findings



25+ Patients

Demographics

- Mean age 46 ± 12 years, 64% female
- 53% White/Caucasian, 23.5% Hispanic/Latino, 18% Asian American, 6% African American/Black.
- 65% overweight/obese

Inclusion Criteria

- Insufficiently active
- Smartphone with iOS13+ or an Android 4.1+.
- Walk without fall risk



Study Protocol

Primary Objective

Assess the effectiveness of the Exercise Rx platform in supporting inactive patients in improving their mean daily step counts

Secondary Objectives

Evaluate app usability and associations between patient-provider engagement and step count changes.



Preliminary Findings

Pilot Data

70% of study participants had an increase in step count. Average step count change was approx. 1K steps overall.

Exit interviews to understand patient and provider voices

Patient Feedback

“

I was literally walking around in my apartment trying to meet the goal. So, it really **helped set me up to start walking a little bit more. It got to my head that there was this thing I had to do for my health.**

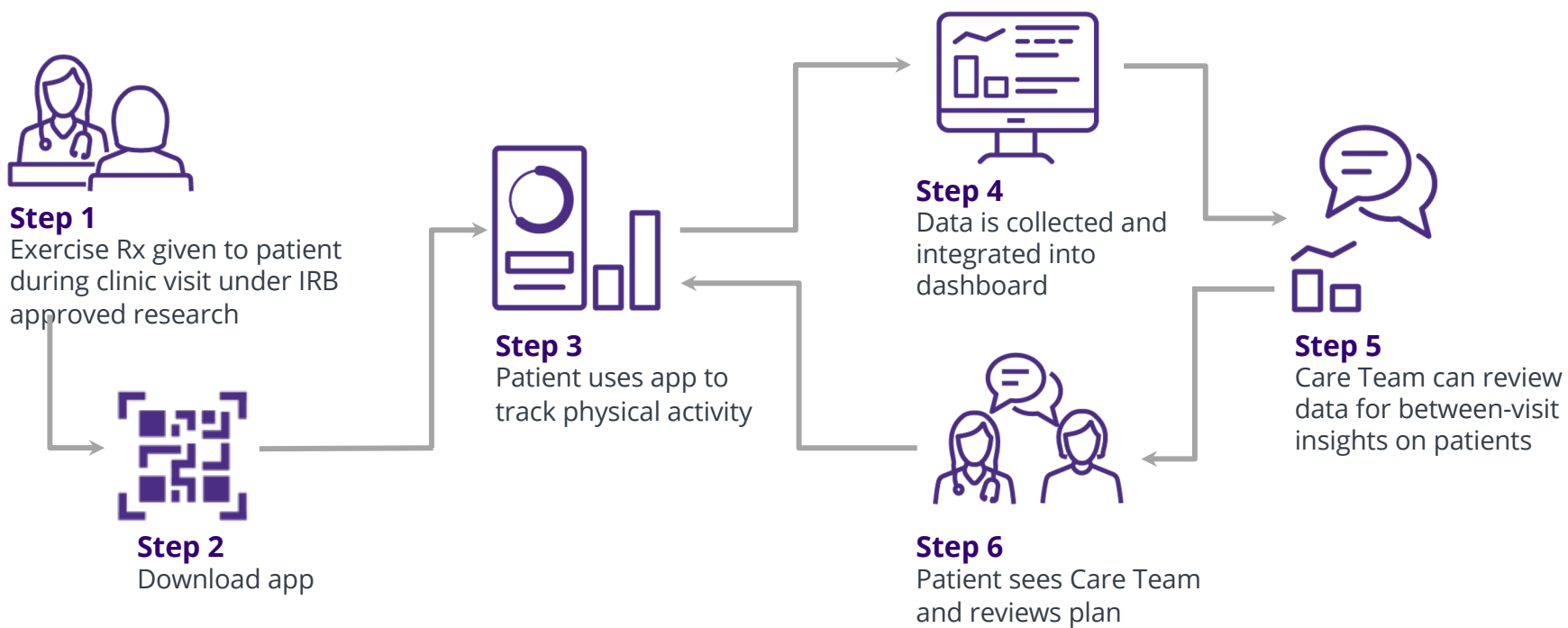
“

I like that it gave me a goal to reach with **someone looking over my shoulder** to make sure I reached it – that definitely **was a motivating factor.**

“

I feel more active – that I'm able to do it. **Reaching that goal every week made me feel better about myself.** I can actually do this. That's how it really helped me and is still helping me.

ExerciseRx Clinical Flow



ExerciseRx Project Support to Date



UW CoMotion Innovation Gap Fund - \$50k



Washington Research Foundation Technology Commercialization - \$50k



Seattle Children's Hospital Cerebral Palsy Research Grant - \$250k



Bladder Cancer Advocacy Network Translational Research Grant - \$1.1m



National Multiple Sclerosis Society Research Grant - \$725k

EXERCISE

Lessons Learned, Discussion, and Future Work

Learnings

Development centered on patients and providers voices and needs

Start out simple

Diverse team members, build better ideas & solutions. Be humble, willing to learn from each other & change course when needed

Balancing research and implementation

Future Work

Continue to grow collaborations with clinical champions

Integration of clinically relevant metrics

Expanding accessibility to providers and patients



Sarah Psutka MD Cindy Lin MD Hanna Hunter MD

W CENTER FOR HEALTH OUTCOMES
RESEARCH & DISSEMINATION
UNIVERSITY of WASHINGTON
Department of Urology

GetMoving Study Team



UW Medicine



Karla Landis MS



Leah Cantor



Ellie Brewer MS



Casey Li



Marielle Yano



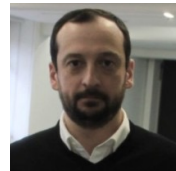
Grace Jun



Kristen Follmer



Erika Wolff PhD



Otari Ioseliani PhD



Richard Li



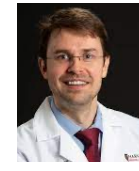
Sean Munson PhD



Andrew Humbert



Zac Annen ARNP



Florian Fintelmann MD



Department of Urology
Since 1956



The University of Washington/
Fred Hutch
Cancer Center
Bladder Cancer
Team

Thank you to our patients and their families!

UW Medicine



Fred Hutch
Cancer Center

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exerciserx@uw.edu

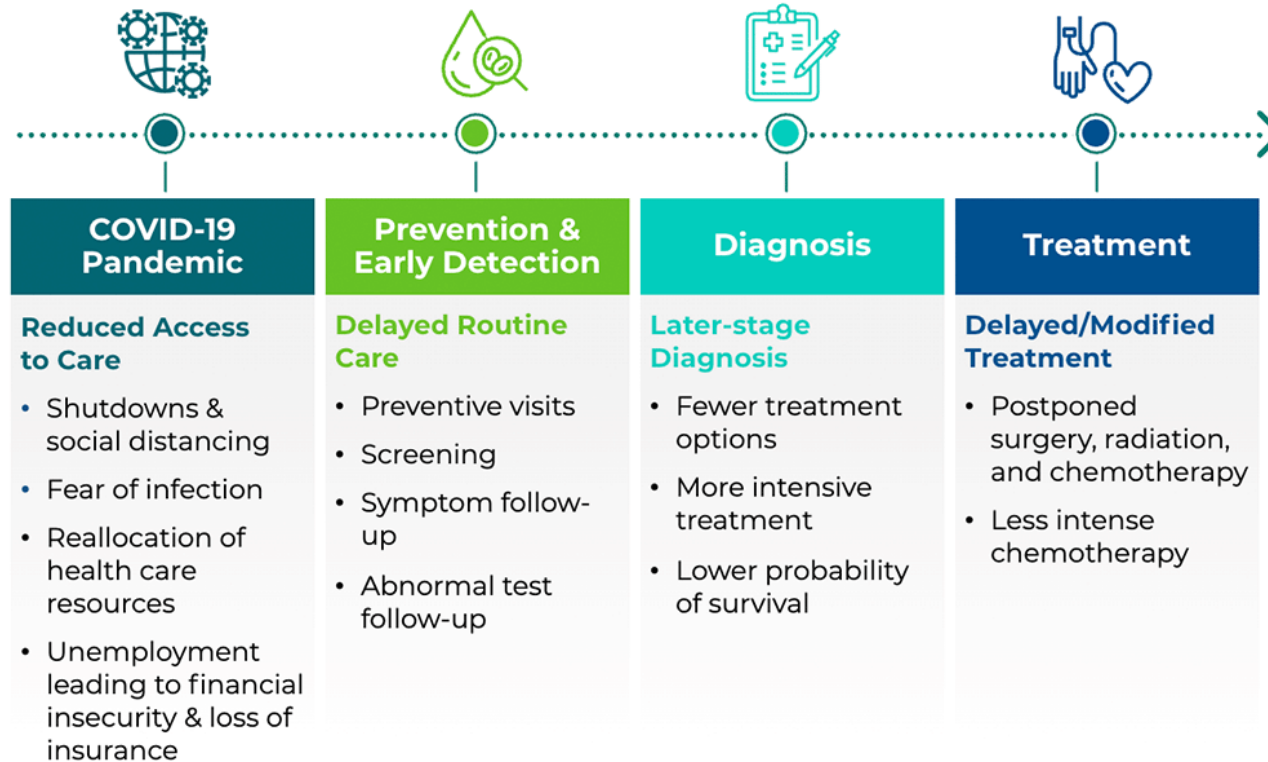
www.thesportsinstitute.com

Career Development Series 2024

Case Study: Developing a Smart Implantable Device

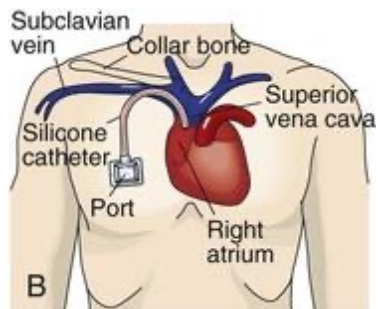
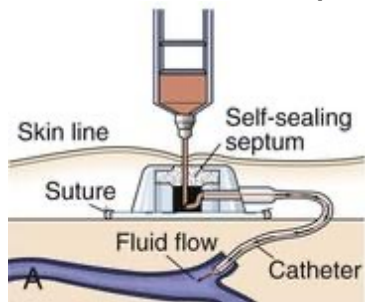
Teddy Johnson, ITHS

Problem 1: Covid Prevented Early Cancer Diagnosis

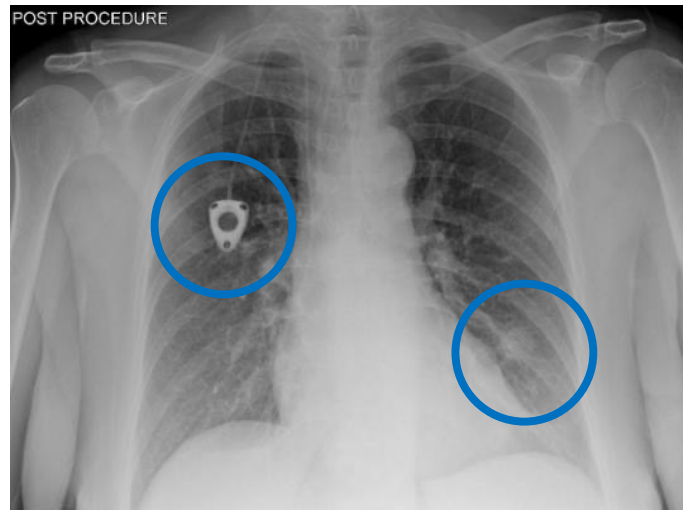


Finding and Treating a Metastasis with Chemotherapy...

... and a commoditized vascular access port

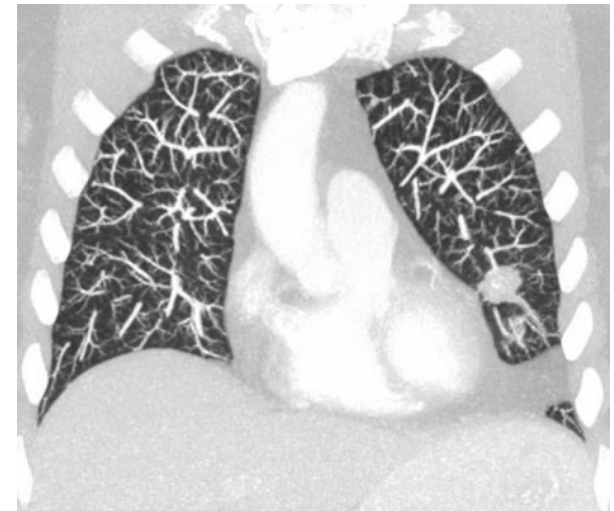


X-Ray



Right IJV chest port with tip at the cavo-atrial junction. No pneumothorax. Left mid/lower zone pulmonary nodule projects over posterior left 9th rib.

CT



CT confirms the pulmonary nodule on chest x-ray is a solid soft-tissue density nodule.

Problem 2: Sepsis Is Identified Too Late

49

MILLION
people worldwide are
affected by sepsis¹

> \$38

BILLION
in annual costs in the U.S.¹

1.7

MILLION
diagnoses each year in the U.S.²

19.7%

OF ALL GLOBAL DEATHS¹

#1

CAUSE
of hospitalization in the U.S.¹
COST
of hospital readmission in U.S.³

Antibiotic administration
DECREASES THE
LIKELIHOOD OF DEATH BY

7.6% ↓
per hour⁴

20% 

of sepsis patients are
rehospitalized within **30 DAYS**³

ONE-THIRD

OF PATIENTS WHO DIE IN
HOSPITALS HAVE SEPSIS²

> 2/3 OF SEPTIC
PATIENTS

enter the health system via
the Emergency Department⁵

New Trend in Reimbursement: Value-Based Care

Oncology Care Model (OCM)

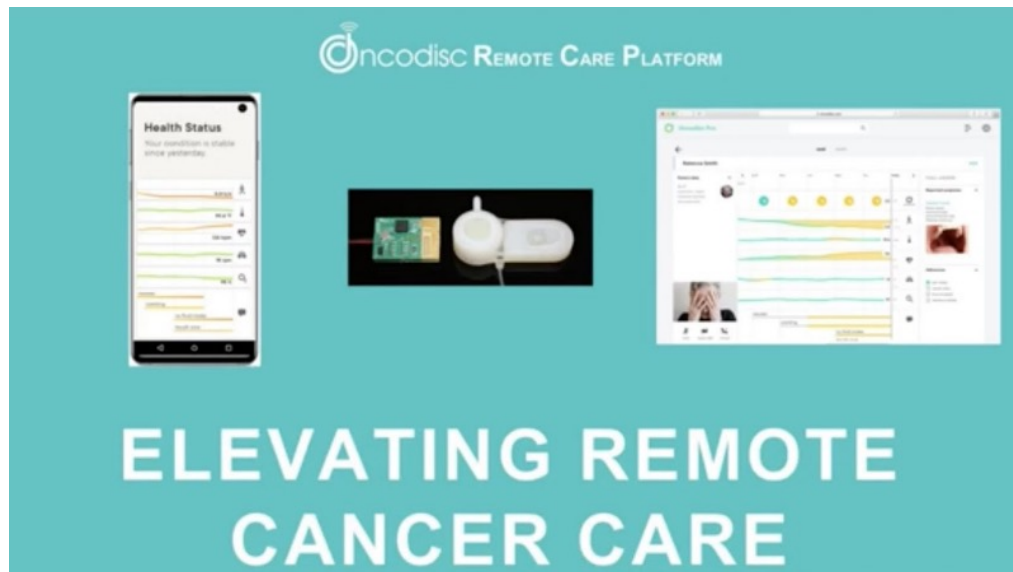


Oncology Care Model



- The Innovation Center's Oncology Care Model (OCM) focuses on an episode of cancer care, specifically a chemotherapy episode of care
- The goals of OCM are to utilize appropriately aligned financial incentives to improve:
 - 1) Care coordination
 - 2) Appropriateness of care
 - 3) Access for beneficiaries undergoing chemotherapy
- Financial incentives encourage participating practices to work collaboratively to comprehensively address the complex care needs of beneficiaries receiving chemotherapy treatment, and encourage the use of services that improve health outcomes.

Oncodisc: Mitigating Risks of Sending Chemo Patients Home



Physician Comments Driving Design and Regulatory Path:

- I don't want the device to make a diagnosis. I just want readouts.
- I want to be able to assess each patient in <15 seconds.
- How many alerts will I get?
- If I don't respond to a notification, am I at risk of negligence?

What Will the Device Do?

Temperature for fever indication of infection

Heart Rate & Blood Pressure for indication of sepsis

Motion for “performance status”, fall prevention / detection

Bluetooth communication with smartphone to communicate with care team

Futures:

Blood testing?

Building the Team to Deliver the System Features

Features and Functions Driving Team Formation:

- Implantable vascular access port device
- Hardware sensors
- Firmware to drive and read sensors
- Software to control and set device
- UI/UX design to optimize interfaces and dashboards
- Quality system covering market needs assessment through fabrication, sales, clinical experience
- Intellectual property to create investible assets
- Manufacturing via contract, then in-house
- Regulatory strategy
- Clinical study

Stretching a Penny in Intellectual Property

The most important thing for founders to do is to prepare for delays in fundraising. To mitigate financial risk, founders should use fixed price services whenever possible.

From patent landscape and “freedom-to-operate” analyses to patent filing and prosecution, IP costs may vary wildly.

Seek IP attorneys with early startup client experience and sensitivity to startup costs. Fixed price patent work is preferable.

Thank You!

Open for Questions

Feedback Survey

A link to the feedback survey has been sent to the email address you used to register.

Please get out your device, find that email, and spend a few moments completing that survey before you leave today.

Tip: If on a mobile device, shift view to landscape view (sideways) for better user experience.