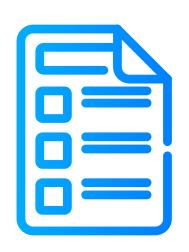


Health Strategy

R

How to build a digital health strategy that evolves with you



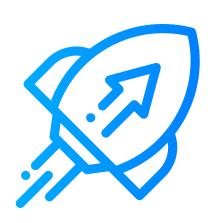












How to Get Started



Step 1: Audit Assets



Digital Health Formulary

















Digital Benefits



Platform in Action

Conclusion

< 02 / 25 >

Why is digital health implementation so difficult for so many health systems?

The culprit isn't a lack of readily available digital health assets, or even a willingness to innovate – it's the belief that transformation needs to happen at an enterprise scale and that digital health strategy needs to be fully baked before anyone takes the first step.

This belief is holding healthcare back. It's depriving patients of the personalized experiences they're used to – and it could be driving them to your competitors.

There's no time like the present to get started. This Digital **Strategy Guide will help you:**

- Figure out where to begin



• Apply the "Formulary" concept to digital health to get organized • Implement, scale and measure the impact of your digital health strategy







Organizations should start with the basics, and focus on getting assets and programs out the door.



Leaders can't decide where to start - so they just don't start. Fortunately, digital health transformation doesn't need to be overly complicated. You can start by taking advantage of the digital assets that you already have – whether it's educational resources, mobile apps, or care management programs – and implement them throughout the enterprise with little heavy lifting.

Organizations should start here, and focus on getting assets and programs out the door. Clinicians should be able to "order" digital health assets from a curated, centralized formulary based on existing resources with no more effort than writing a prescription. Patients can access these assets where and when they want to, in the format that serves them best. And organizations can analyze usage patterns to seize opportunities to scale up anything that's working.

That's the power of a digital health strategy that's been designed to evolve in step with the unique needs of the organization and the patients that it serves. Instead of adopting a static strategy with little flexibility, organizations can build and refine their digital strategy in a much more agile way and quickly respond to new challenges or unmet needs.

And that's what makes this different than the case of pilot-itis that has plagued so many digital health initiatives in the past. There's both a strategy framework and a technology infrastructure in place to support program expansion. No more projects hanging in the balance as they await yet another review meeting and approval.

DIGITAL STRATEGY GUIDE



< 04 / 25 >





Today's health systems aren't keeping up with the digital experience consumers are used to





Personalization is the name of the game in today's consumer digital experience – except in healthcare. It doesn't have to be this way.

It's personalized recommendations for products from our favorite retailers.

It's a personalized user interface (UI) when we log into our favorite entertainment or social media app.

It's personalized messaging that accounts for our previous experiences, purchases, and interactions with a company.

Unfortunately personalization isn't part of today's digital experience in healthcare.

While digital health can't solve everything, it does create an opportunity to personalize outreach based on what is happening to a patient at any given point in time.



Why is healthcare lagging behind other industries?

Mainly because, all too often, neither the engagements themselves nor the workflows backing them have been automated. Even the most basic of tasks – reminding patients of an upcoming appointment – can involve manual workflows.

Making phone calls and sending individual emails doesn't scale, and few provider organizations are in a position to hire more staff. Plus, these tasks represent extra work for office staff, distracting them from the patients who are in front of them in the clinical setting, and creates friction for patients, who are now receiving outreach from the same provider in multiple modalities. And in the unlikely event that things are automated, personalization all too often goes out the window, replaced with dry, robotic, and unhelpful messaging that doesn't delineate the type of engagement the patient has come to expect.

Other types of seemingly simple engagements suffer from a similar emphasis on manual interactions. Tasks such as scheduling appointments, paying bills, refilling prescriptions, and reviewing educational resources can be done digitally in theory, but in reality, the most foolproof workflow is calling the practice and speaking to a person.

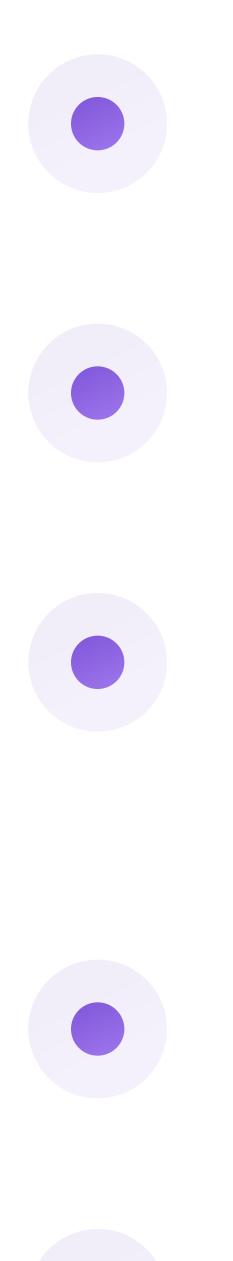






Poor Digital Experiences The Myths

Why haven't healthcare organizations invested in improving the digital experience for patients? It's often because executive leadership has preconceived expectations about why the transition to digital health will be a significant undertaking:



Digital health strategy must be well-defined before anything can happen.

level scale.

Multidisciplinary teams must curate hundreds of digital health apps that will be used across dozens of business units.

IT and IS departments, already strapped for time, must play an integral role in every step of the process.

Digital health adoption must accompany an enterprise-wide transition to value-based care.



The transition must be transformative at an enterprise-













In today's environment, no healthcare organization can afford to get stuck, making the same familiar excuses.

Now more than ever, the digital health experience matters. Here's how to make yours one of the best in the business.

Read on to the next page \rightarrow





Introducing the Digital Health Formulary: A Framework for Organizing your Digital Health Strategy

Centralizing existing digital health assets and rolling them out at your own pace will make transformation far less disruptive than it needs to be. There's one more hurdle that organizations need to overcome, though: Making sure those assets get into the right hands at the right time.

Right now, sharing digital health assets is difficult. If clinical staff want a patient to be able to use a clinically verified smartphone app to manage a chronic condition, they typically need to fill out an IT service ticket. If they want to send a video that's been posted on the health system's website to a patient prior to a visit – to explain a diagnosis, say, or prepare them for a procedure – that requires a ticket, too.

(And when that gets to be too cumbersome, the clinician instead copies a URL or non-standard resource and pastes it into a patient message or visit summary. That provides a poor patient experience, leaves the clinician with no ability to track engagement – and potentially goes against organizational standards for sharing resources.)



The problem with this process is that those IT support tickets all too often disappear into a black hole. When you look at the modern healthcare IT or IS department, it's not hard to see why. They're understaffed as it is, and they have their hands full with security monitoring, EHR upgrades, and managing an ever-growing number of bedside monitoring devices. A request to embed a video in an email or portal message, or to get a patient set up with a chronic condition management app, is going to be a low priority.

The patient experience suffers; they miss out on valuable resources that could help them prepare for a medical procedure or selfmanage their care. The clinician experience suffers; they feel ignored by their IT department, or – in an effort to take matters into their own hands – they share resources without approval, which is always a risky proposition. The health system as a whole suffers, too; the valuable resources they spent time and money to create and curate go largely unused, patient outcomes suffer as a result, and preventable readmissions and complications increase.







Fortunately, there's an existing model in healthcare that we can apply to digital health: The formulary





-	Clinical Category	Sub-Categories	Digi
	Diabetes	Type 1 Diabetes Type 2 Diabetes	Prefe Alter
		Diabetes Prevention	Prefe Alter
	Cardiovascular	Hypertension	Prefe Alter
	Pulmonary	Asthma COPD	
	Mental Health	Depression Anxiety Insomnia	



ital Health Forumlary

ferred ernatives ferred: ernatives: ferred: ernatives:





A physician doesn't need to request permission every time she wants to write a prescription for a drug that's already on the formulary. She can give the patient the prescription with the confidence that it's the right drug for the patient's condition – and that the patient's out-of-pocket cost is limited to his insurance copay.

Imagine the same concept, only for digital health assets.

- could be sent automatically?

That's the idea behind the digital health formulary

It's a curated and dynamic list of digital assets that have been pre-approved for distribution and can be readily shared with patients. It significantly streamlines the process of getting the right information into patients' hands at the right time without cumbersome workflows getting in the way.



The formulary is a list of drugs covered by an insurance plan

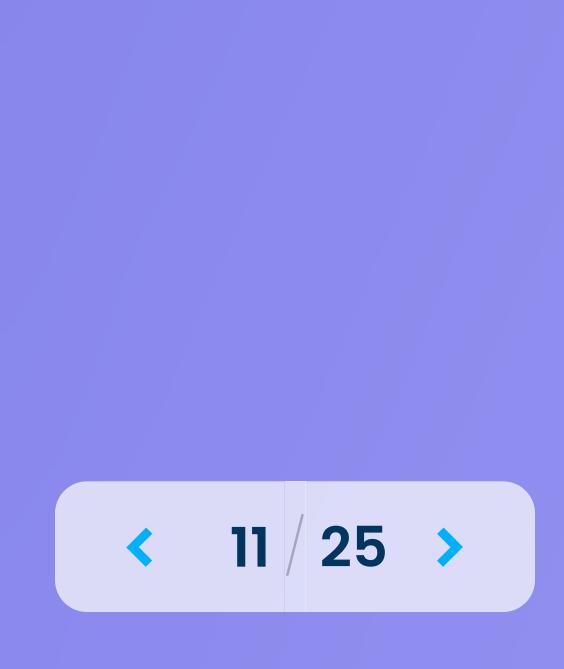
What if pre-surgery educational guides and reminders

• What if recommendations for digital therapeutics, home health monitoring devices, or other condition management

resources could pop up in the EHR at the point of care?

• What if programs could scale across the enterprise without the need to deploy additional IT infrastructure or staff?

Drug Name	Drug Tier	Requirement / Limits
	1	MO QL 60 Tablets / 20 Days
	1	PA QL 60 Tablets / 30 Days
	1	QL 1 Package / 30 Days
	3	QL 1 Package / 30 Days
	4	MO QL 60 Tablets / 30 Days
	4	MO QL 60 Tablets / 30 Days
	1	MOPA
	3	QL 1 Canister / 30 Days
	4	QL 1 Canister / 30 Days
	1	PA
	1	MO QL 60 Tablets / 30 Days
	2	QL 2 Vaccines / Lifetime
	2	PA QL 2 Cartridges / 28 Days
	1	MO QL 60 Tablets / 30 Days
	2	PA QL 6 Syringes / 30 Days
	1	60 Tablets / 30 Days
	1	MOPA
	2	QL 1 Canister / 30 Days
	1	QL 1 Canister / 30 Days
	5	QL 2 Vaccines / Lifetime
	2	MO QL 60 Tablets / 30 Days



How to get started with a digital health formulary

The digital health formulary sounds great in theory – and we can already hear some of the possible obstacles. It's hard to know what assets to share, as well as when and how to share them. It's also hard to gather data on whether patients are actually using the assets and deriving value from them. And it's really hard to do all this amid unpredictable patient volumes and ever-tightening margins, when the primary focus for many health systems is maintaining existing operations.

However, getting started with a digital health formulary isn't as difficult as it sounds. In reality, it's a three-step process with two primary aims: To make the most of what's already in place and to augment them with a platform purpose built to help healthcare organizations stand up and scale a digital health formulary.





Audit the assets you already have

Identify existing resources that can be used for a new purpose

Implement a digital health platform



< 12 / 25 >

Step 1 Audit the assets you already have





As we discussed, the typical healthcare organization has a treasure trove of digital assets that are here, there, and everywhere.

An audit is important at face value because it creates an inventory of assets that can go right into your digital health formulary with little effort.

There are several other benefits to the digital asset audit as well.



Identify existing third-party partners

From a strategic level, this offers insight into which vendors may be worth making a focal point of your digital health ecosystem due to breadth and depth of offerings, clinical outcomes achieved, and so on. Tactically, this helps to streamline asset management and contracting, as IT and accounts payable alike now know which vendors are active customers and which can be dropped from the rolls.

Find gaps in your formulary

Is one business unit or medical specialty disproportionately represented among your digital assets? Are you missing browser-based virtual visit tools? Do you have lots of pre-operative educational content but little focused on recovery? An audit will help you to identify these gaps and start to think about the best ways to close them.

Continue to gain value from owned content

Once you know what digital assets you have, and once they're all stored in one place, it's much easier to distribute them far more widely. Your organization will generate additional value from existing content, whether it's an increase of preventive screenings or a reduction in post-surgery readmissions. In addition, this helps make the business case to create more content, now that the cost of distribution is lower and the ROI is higher.

Build the foundation for your digital health strategy

An asset audit helps an organization determine where it currently stands with digital health, where it wants to go, what additional investments it needs to do to get there, and how long it will take. That's essentially the foundation of a digital health strategy – and it provides clear and direct insight for informed decision-making for years to come.



< 14 / 25 >









An audit of existing assets gives you two critical pieces of knowledge.

One is a sense of the gaps that need to be filled. The other is an idea of where existing resources can be repurposed, whether to fill those gaps or to address a new use case

altogether.



The most common example is expanding the use of an existing asset. Maybe you started using a third-party product for its hypertension self-management capabilities and it has since expanded to cholesterol. Perhaps one primary care group's virtual visit tool is exceedingly popular and other providers in the network would benefit from them. Maybe the email messaging behind gastroenterology's uptick in colonoscopy screenings can be slightly modified for primary care, or for pulmonology and lung CT scans.

Another example is identifying under-utilized assets. One physical therapy office has seen high adoption rates for its video tutorials for at-home exercise, but no other PTs are using it. Primary care physicians are struggling to recommend self-care programs for Type 2 diabetes, and endocrinology has a preferred list of apps. Videos educating patients about cancer risk factors are traditionally hosted on the breast center's website, but that means patients studying other types of cancer don't see them.

As discussed, in both cases reuse of existing assets – whether owned or purchased – enables the additional creation of value and helps make the business case for additional investment. There's another downstream impact as well: As more clinicians are able to recommend more digital assets to more patients, those within the organization who have been skeptical of adoption will begin to see the light.





Step 3 Implement a digital health platform

The digital asset audit and the content reuse campaign are certainly important, but there's one final step to realizing the full potential of the digital health formulary.

Anyone who's tried (and failed) to get healthcare professionals to use technology knows that even the slightest bit of friction will stop adoption dead in its tracks. This is understandable; clinicians can ill afford to spend their time clicking through an EHR or opening yet another desktop application to locate the digital health asset they need when they're already half an hour behind and working through lunch.

The solution to this very real problem is the digital health platform. At a basic level, this is a one-stop shop for all your digital assets. But it's much more than just the central repository that we discussed earlier. Here's what else a digital health platform can offer.



EHR integration

We all know that using a solution that isn't native to the EHR is a non-starter for clinical staff. But that's not enough: The solution has to be integrated in the right place: Where and when in the EHR workflow a provider will be discussing pre-surgery preparation, chronic condition self-management, or the follow-up appointments that are part of a care plan.

A purpose-built digital health platform, with access to all assets in the digital health formulary, is better suited for this purpose than a series of one-off integrations. It's far easier to implement and maintain, which puts far less strain on your IT staff. It's also much easier to scale across the enterprise, as integrations don't need to be rewritten each time.





Performance analytics

With all assets in one place, your organization can easily add a layer of performance analytics and obtain insight like never before into how assets are being used. Are patients more likely to watch a 10-minute video to the end, or is five minutes better? Which flu shot reminder email led to more appointment bookings? Among the three diabetes management apps in the digital health formulary, which one are physicians recommending the most? Ultimately, what assets and the resources associated with them are most likely to lead to a patient closing a care gap? Answering questions like this helps an organization further optimize how assets

are used and shared. Plus, data-driven insight will appeal to physicians and executives alike, as they'll want to see the numbers behind the business decision.



Healthcare often talks about the "clinical champions." In the past, these individuals had to tout the benefits of a digital health solution up and down the organization chart for months, if not years, before getting the OK to implement a pilot program to test the solution. With a digital platform in place, though, any clinical champion can roll out a new asset as long as it meets the predefined criteria for inclusion on the digital health formulary. This encourages clinical staff to be on the lookout for tools that will improve the patient experience in their area of expertise – and to get them in patients' hands much faster than ever before.

DIGITAL STRATEGY GUIDE

Easy scalability

Once the digital health platform is in place, all it takes to roll out a new app is to put it on the platform. There's no infrastructure to set up or integration to configure. We've talked about the benefits for IT and IS, which now have more bandwidth for mission-critical work such as EHR optimization and cybersecurity. But there are clinical benefits as well.



The benefits of a digital health strategy that evolves as you do

With a digital health formulary and platform in place, organizations can start to put their digital health strategy into practice.

As we discussed, the pace of this evolution should be up to the organization. No one knows the staff, the patient population, and the operating environment as well as its leadership. It's certainly possible for organizations to learn from each other's experiences, but ultimately they should define their own strategic direction.









Plus, there are several advantages to this approach



-

You're not beholden to a single application or business partner. Instead of waiting months for a product to be finished – and potentially losing patients in the meantime – you can make the most of the assets you have in place and simply offer the new app once it's ready.

You can replicate proven use cases across more business units or patient populations with just a few clicks, without months of custom development. In effect, the digital health platform acts as a "multiplier" for assets you already know are going to be effective.

You can test the effectiveness of certain types of messages, engagements, interactions, and resources, using the results to modify programs to better meet patients' needs.

You can roll out use cases for existing and new assets quickly, simply by adding them to the platform. This takes away a lot of heavy lifting from both IT and clinical stakeholders – the latter of whom benefit because the platform's EHR integration ensures assets are in the right place in clinical workflows.

You can better align the use of digital health assets to business initiatives such as quality improvement or value-based care initiatives. The analytics layer atop the digital health platform provides performance metrics at a glance and enables quick pivots to get better results.

You can build better digital connections with patients, improving their care experience and increasing their loyalty. With insurers, retail clinics, and telehealth providers all looking to take business from brickand-mortar healthcare – and all leading with their digital journeys – this provides a pivotal competitive advantage.



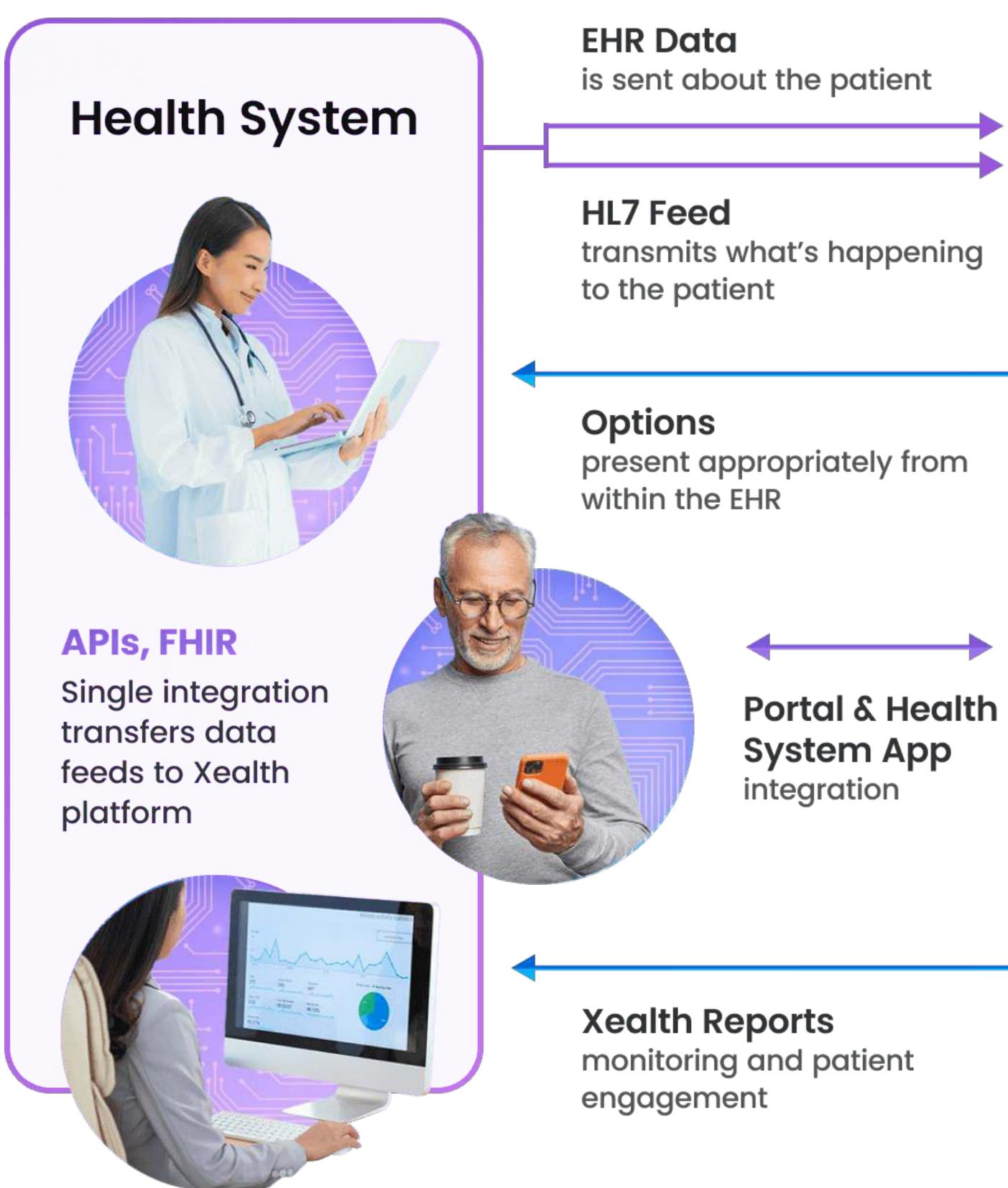






The digital health platform in action

Numerous healthcare organizations have worked with Xealth to create and curate a digital health formulary and to implement Xealth's digital health platform. Our SMART on FHIR app embeds digital assets into charting workflows, while our centralized management platform provides a single integration into industry-leading EHRs as well as a Digital Command Center for monitoring digital health ordering details and understanding which assets are driving the biggest outcomes.





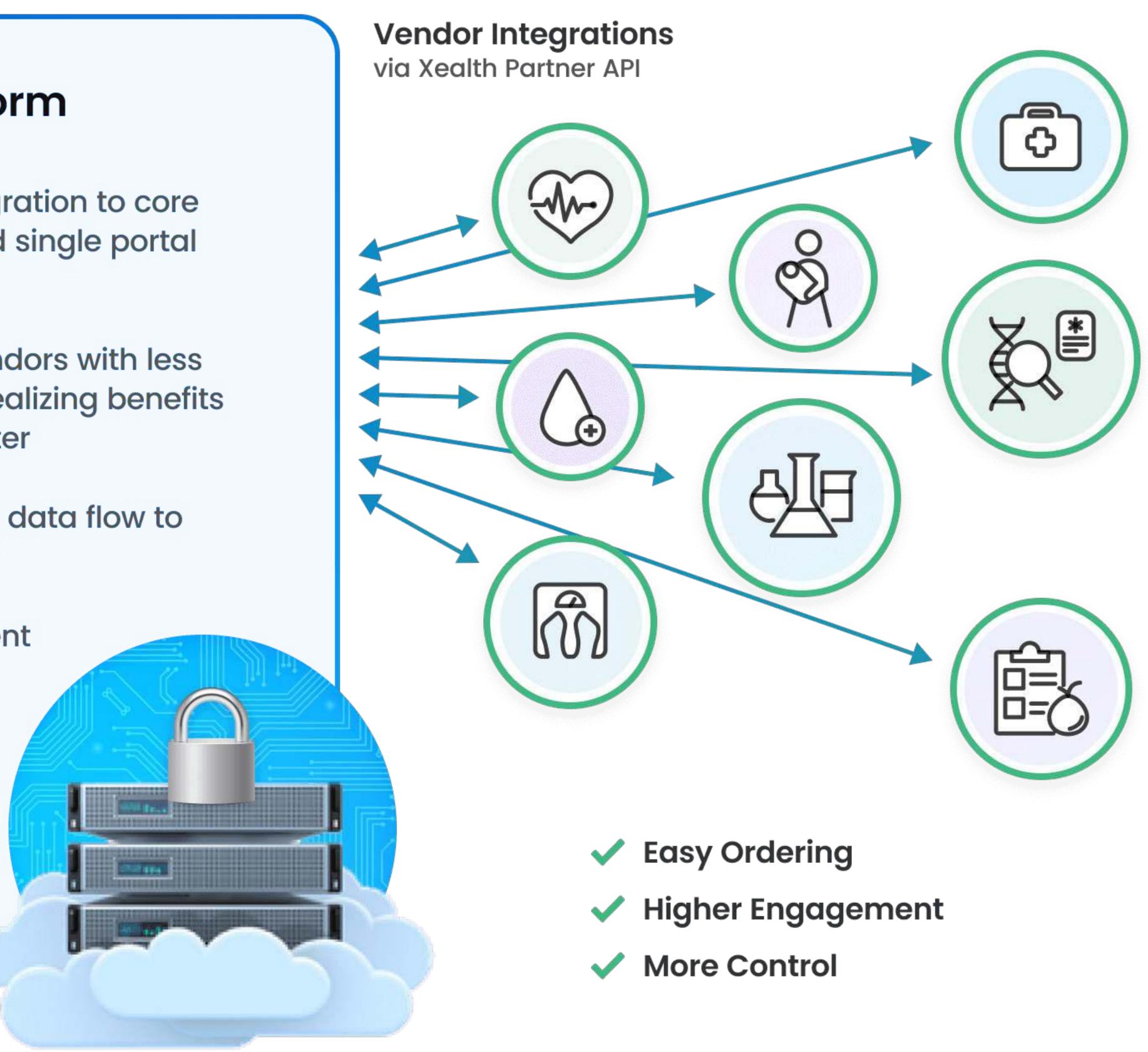
Xealth Platform

Single IT / IS integration to core infrastructure and single portal integration

Onboard new vendors with less IT / IS staging - realizing benefits from vendors faster

Control and track data flow to increase security

Standardize patient comms and engagement paths

















One health system embedded orders for virtual behavioral health services in the clinical workflow and launched an associated email campaign with an open rate of 80%.

Embedding a call to action in a tobacco cessation video and coupling that with direct outreach helped one health system increase the likelihood of attending first appointments by 20%.

One digital therapeutic

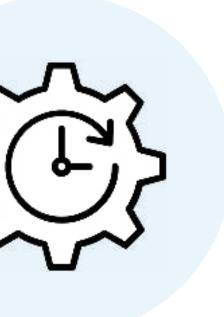
manufacturer distributing its product through Xealth saw a 4x increase in its engagement rate.

Xealth clients have seen significant increases in patient engagement and impact on staff efficiency is noticeable as well.

conversion when it's possible to place orders for digital assets within the EHR workflow or bring together email campaigns, educational resources, and patient outreach. The



One hospital provided patients with certain chronic conditions with a wearable or ingestible sensor to track their medication use - and achieved an **adherence rate of 91%**.

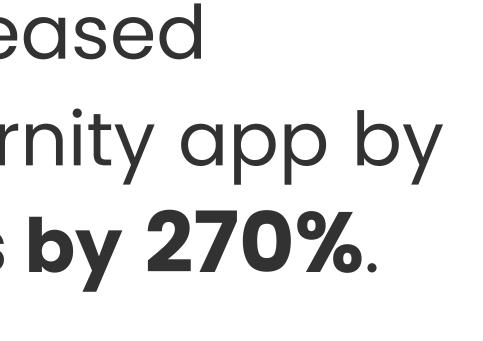


One health system made it possible for clinical staff to order advanced directives within the EHR, saving several minutes on a previously manual process done thousands of times each year.



One health system increased enrollments for a maternity app by 460% and active users by 270%.





< 22 / 25 >

Xealth's digital health platform gives organizations and administrators control over all things digital

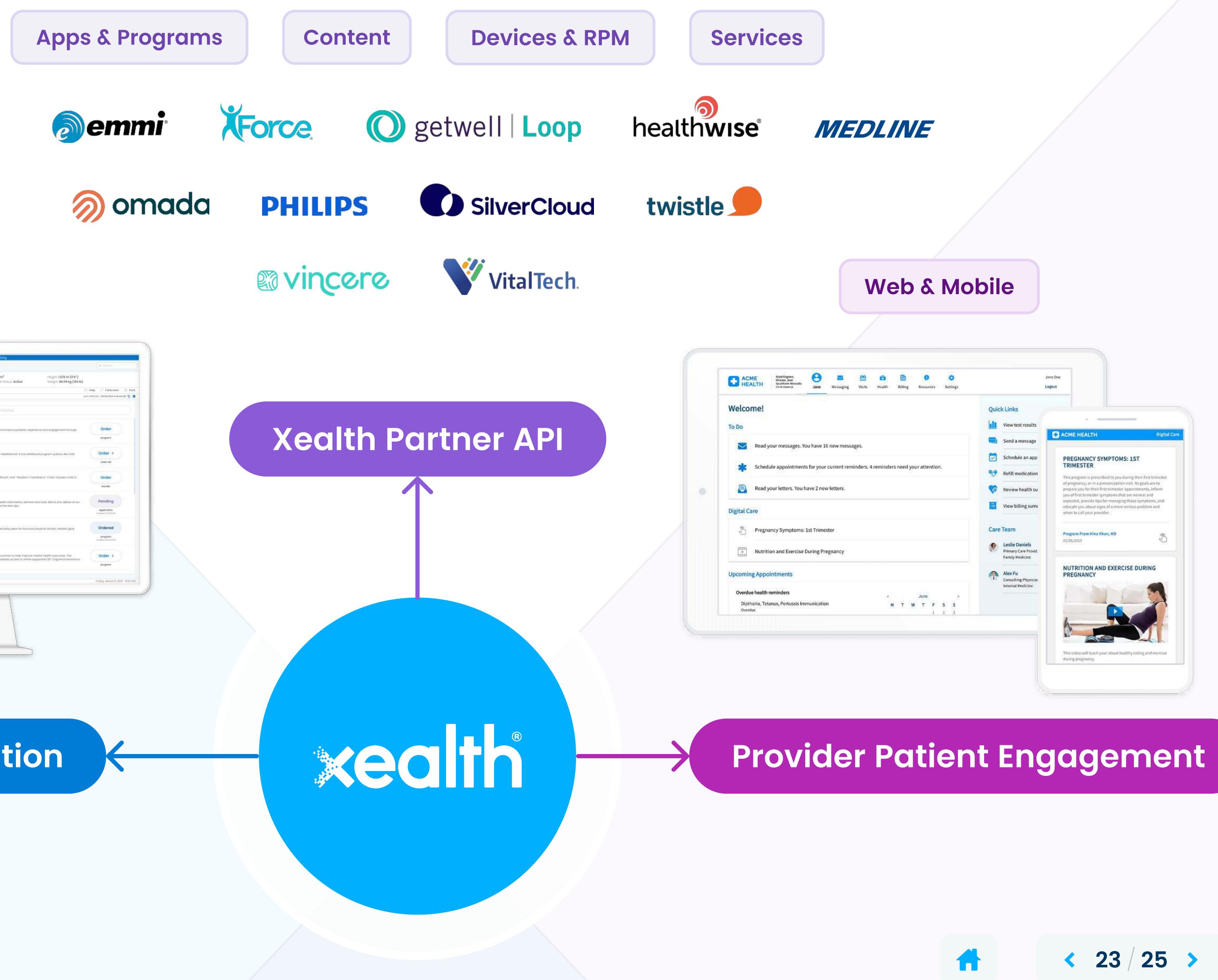
amazon

Ordering & Monitoring

Constantine Hamilto Poyor: MuePlus-Bluetool PPO 10.11.31.3 kg/m² Female, 33 years old, 2/9/1988 Conguloge: English Policies Portal literus: Active. PCF: UNknown Merea Digital Care CONTINUES HAMILTON DECEMBER SECTION. Patient Summory Order 17 Recommunitations Q. Second in the contribut Allergies Monito Bubyscripts A victual case perform the Orders & Meds in Truthouse A powerk Diagnosis Watalernity And Parenting Supp Diagnoses & Problems (Invite) Pregnancy Order Set Clamity This other set includes educational videos from Emma and questionnaive from Hearthemort & has additional program splitence like Ova Preptoney Waterrity Health for patients in their throughout their entire programoy. Thought stiffiers and pa **Digital Care** #Moternity And Parenting Support Second Trimester Pregnancy Bundle This is a two of educational indexe from brance including "Searcheeding". "Cond Boest", and "Newborn Covertiness". If also reduces a link to multiple classes. It is major: for pothetts in their spothet it menter of pregnance WMohamity And Parenting Support Cardiology Trenuriters Messager Taports Tasks Constantine Harribert Heattomat (means) Circle Women's Health App Over Materially Heaten Apr Hamilton The Room Station Promin 31.3 kg/m² 100(pin 1074,m10.01) (corpor 88.09 bg (104.m) icialii cumantphone aga that connecte mente and mome to be to husball each in equimator, services and core Mome who deliver of a comment forward farming declared Samplemper Brighth whittle peptidiz cost even of themselves only liver children are exclusively as the two space DepterCare Com. Phylinese II date #Motornity And Parenting Support Orden terrorisation scotteres and their ent comercial. Better 2000 hant werter 🕤 🤮 O PROSERM PARTED O ONTROSMANE INCOMPLETE (minime) HMR (Health Management Resources) HMP (Health Honogement O weight Watchers hereither Depression, Analety, and Physical Health Problems ething, and the accountability year patients need to vaice #Obesity Prevention Care Bap contraction of the local division of Manual / Immune News 33, 3838 Instrumenter Jack 20, 2023 SilverCloud (Digital Mental Health Platform) VERS-4PS MATCHES PROGRAM ACTIVE vertilised to a christolia waterood digital memorihisted terri with Circle Women's Health App Second Newborn Care Basics rapy) programs such as depression, metally, or down through the second seco transmit freeman Aul 18, 2525 and spinned Apr. 25, 2003 Envee Product Set Diobetes: Nutrition And Healthy Eating mound (broosed just 5, 200 manual / Immini Det 5, 3026 (minimum Nev 6, 3031 O VOID DI WETCHED Bepression: Should | Take Antidepressionts While Sound Breastleading manue (trainet Get 15, 2620 Bifference Between the Flu and a (0-0-mil/insend Set 8, 2023 over 0.000 way, Moore & 2022, 12 12 and

EHR Charting Integration







Digital health innovation doesn't need to be complicated

With the right technology and expertise in place, organizations can adopt the right tools for the right use cases at the right time – where adoption will be highest, resistance will be limited, and ROI will be almost immediate. Better yet, it won't require a seismic shift that threatens to tear the organization apart. In fact, it can work with the tools already have in place including, critically, the electronic health record (EHR) system that you've already invested in – and grow organically, in a way that makes the most sense for your organization and the patients it serves.

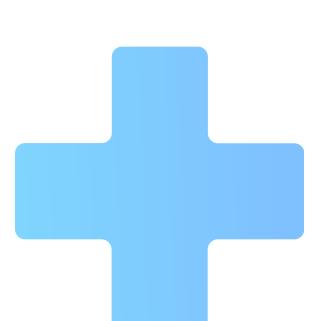
That's because, in the end, it is all about the patients. If their immediate experience when they use your digital health tools is poor, what are the chances they'll continue to use them? Can your organization afford to have patients continue to call the office while digital tools sit unused? Even worse - can your organization afford to lose patients to providers that offer a more seamless digital experience, whether it's the hospital across town, the neighboring retail clinic, or the virtual care platform from Silicon Valley?

In an increasingly competitive market, a digital health strategy is essential to long-term success. Your strategy should be unique to your organization but you shouldn't have to go it alone.

<u>Contact Xealth</u> to learn more about how leading hospitals and health systems benefit from our digital health platform and our assistance in creating the digital health formulary that best addresses their digital health goals – and allows them to meet the personalized needs of their patients.



Your strategy should be unique to your organization but you shouldn't have to go it alone.











For additional information visit www.xealth.com

Send your questions or comments via <u>www.xealth.com/contact</u> or <u>bizdev@xealth.com</u>

Headquarters 502 2nd Ave, Suite 1200 Seattle, WA 98104

© 2023 Xealth, Inc. All rights reserved.

