

## **Disruption: No one is immune**

Ben Stormer
VP, Innovation Solutions
Fuse by Cardinal Health



#### **A Country Without Borders...**

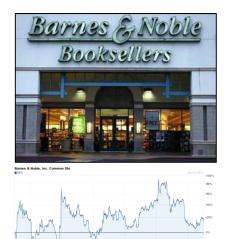
<u>Die</u>



BGP Chapter 11 - 2/16/2011 2/15/2011 share price - \$.23 **Thrive** 



**Survive** 



Up 15.9% in 2 years

#### Quick Quiz: Who has been disrupted?











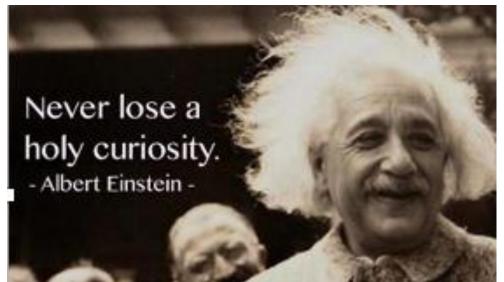




Source: Diamandis, P. (2017, May 03). 12 Industries Disrupted by Tech Companies Expanding Into New Markets. Retrieved May 04, 2017, from <a href="https://singularityhub.com/2015/10/26/12-industries-disrupted-by-tech-companies-expanding-into-new-markets/">https://singularityhub.com/2015/10/26/12-industries-disrupted-by-tech-companies-expanding-into-new-markets/</a>

#### Finding the Disruption "Antidote"

Themes that influence our technique









### **Experimentation**

"In today's real-time, online environment, **good ideas matter less; testable hypotheses matter more**. Tomorrow's innovations and strategies will increasingly be the products — and byproducts — of real-time experimentation and testing."

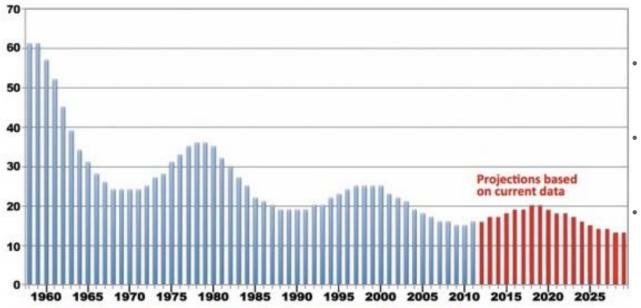
"The biggest challenges are not technical or financial, but cultural and organizational. At most firms, management overwhelmingly favors planning, programs, projects, and pilots over the real-world benefits of experimental knowledge and insight. Most don't realize how exponential economics of experimentation can bolster their innovation investment portfolios."



Article: R&D, Meet E&S (Experiment and Scale)

### Why Focus on Experimentation?

#### Average company lifespan on S&P 500 Index (in years)



Only eight companies from 2000

from 1955-2014

88% turnover in Fortune 500 list

Fortune 20 remain in 2016

52% of Fortune 500 companies have merged, been acquired or gone bankrupt since 2000

Year (each data point represents a rolling 7-year average of average lifespan)

DATA: INNOSIGHT/Richard N. Foster/Standard & Poor's

\*Mark Perry, AEI 8/18/2014

\* Tech.com



## **Our Challenge...**

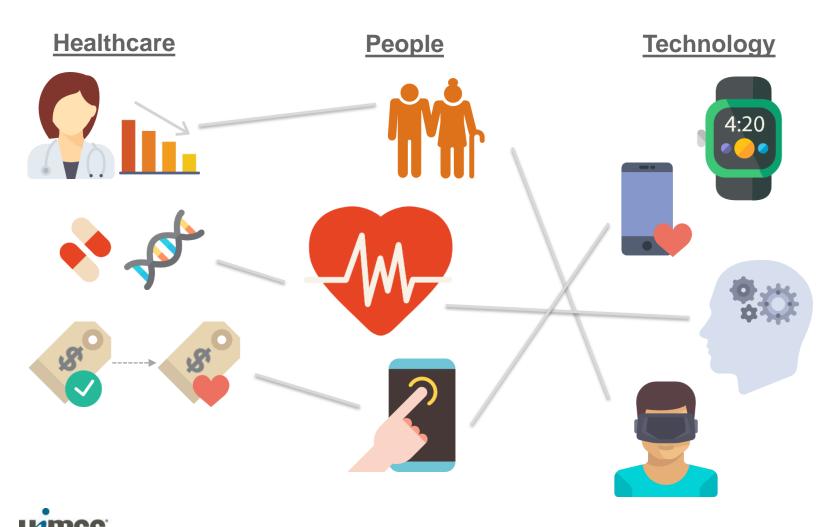


### **Healthcare System Observations**





#### **Global Trends**



### **Patient Experience**

### 65

#### JOURNEY MAP | Independent Pharmacist servicing a CMR-eligible customer

			before	during							
	STAGES	Dispensing		Customer Approach		Verify customer ID		Examine & Enter Rx		Offer	СМІ
DOIN	NG /SAYING	I Pos	Filling escriptions	Greet customer at counter	Ask: Picking up or dropping off?	Ente Ask customer for last name	er customer info Ask customer for D.O.B.		Look up medication in PMS k tech to k inventory	Cross check MTM so to make sure patie eligible for CMI Ask cus willing minute	ent is R stome to ha
	THINKING		etting busy f a sudden	What is her name?	Do I have a script waiting for her?	t What is her n like to greet name.	her by	Do we have this or the shelf?	,	is flagged With a CMR she's control be real	on, th
	FEELING				recall fiel flaffie	Embarrassed abo			about having to order placed	Hopeful she'll agree	H
OPPO	PRTUNITIES -	<b>.</b>	\	stomer loyalty is bu with Pharmacist, b ationships are har	out so many	Pharmacists <b>not a</b> l		е	echs are manually flageligible customers in PN viewing in Outcomes or	VIS by eligibili	



## **Patient Experience**

#### ervicing a CMR-eligible customer

customer ID	Examine & Enter Rx		Offer CMR		Set expectations	Dispense	Consultation	
Enter customer info	Review prescription	Look up medication in PMS	Cross check MTM software to make sure patient is eligible for CMR	;				
er Ask custome ne for D.O.B.	r Ask te check inv		Ask customer willing to have minute consu	e a 20	Ask customer if waiting or coming back			
er name, I'd reet her by ame.	Do we have this on the shelf?	Oh, she is for a C		would	Where will I fit this in?			
			·	ppy she greed				
about not r customer	Anxious about having to get an order placed		she'll agree		Anxious about fitting it all in			
ot alerted in real MTM eligibility	Techs are <b>manually flagging</b> eligible customers in PMS by reviewing in Outcomes or Mirixa		S by eligibility <b>not</b>	often	Customer is unsure of CMR is, if it costs mo			



#### **Remote Patient Monitoring**

"Medication nonadherence is a huge and costly problem, and technology like RPM could give patients the support and accountability they need for better day-to-day health management that can also avoid costly episodes of care." - Tom Halterman vice president of Medication Therapy Management at Cardinal Health



\*Source: MedTech Boston



### **Nontraditional Payment Models**

Value-Based Care



**Out of Pocket** 



**Medical Tourism** 



**Membership Model** 



#### The key ingredients to avoiding disruption



Voice of the customer



Curiosity



**Experimentation** 



# Open Discussion

