

DignifiHealth

An Analysis in the Context of The Forrester Wave for Digital Decisioning Platforms

Published December 8, 2020, the Forrester study assesses Digital Decisioning Platforms (DDP) and how they stack up against market competitors. While aimed at general purpose DDPs, the following will assess the DignifiHealth platform amidst the Forrester context, as it relates specifically to the needs of the healthcare industry. An intermediate level understanding of value-based healthcare and population risk management is assumed on the part of the reader.

Healthcare is an industry overrun with data but lacking in its ability to turn that data into information to drive actionable decisions. This is due, in part, to the separation of physicians and healthcare providers, as domain experts, from the decision makers who are driving outcomes-based healthcare. Third party payers are in the driver's seat, dictating how medicine is practiced, with the onus of fulfillment resting squarely on healthcare providers who traditionally have inadequate digital tools to provide insight and therefore actions which produce desirable outcomes. For this reason, the United States averages only 8% to 15% fulfillment of needed preventative healthcare, driving healthcare costs ever higher while patient health metrics continue to decline.

Digital Decision Platforms

DDPs provide easy-to-use tools for authoring decision logic with low-code and no-code techniques, allowing business managers and domain knowledge experts to arrive at the best possible decisions. Without extensive training or technical expertise, decision makers can manage both simple and complex decisions in a digital platform that provides transparency and analytics for sensitivity analysis and outcomes management.

Predictive analytics and machine learning (PAML) algorithms are typically employed to assess large quantities of relevant data, identifying patterns and providing unique insights which are difficult, if not impossible, to do so at scale in an analog manner. This supports rapid decision iterations, allowing measurement of performance metrics, feedback intake, decision variable customization, and further testing and iteration until the desired outcome is achieved.

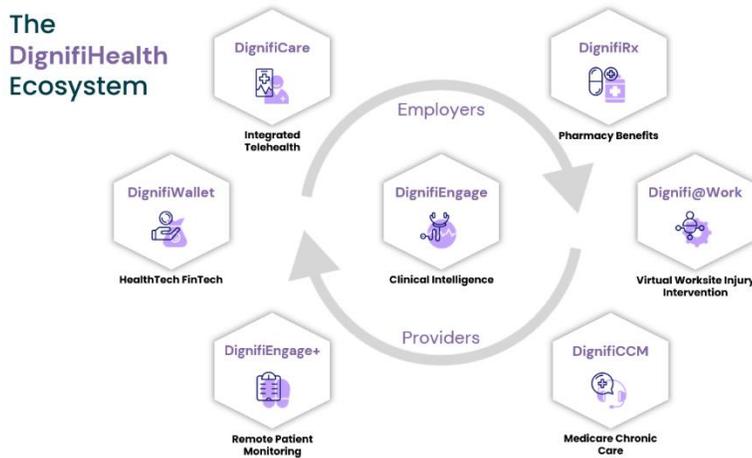
THE FORRESTER WAVE™
Digital Decisioning Platforms
Q4 2020



Source:
<https://www.forrester.com/report/The+Forrester+Wave+Digital+Decisioning+Platforms+Q4+2020/-/E-RES159087#>

The DignifiHealth platform checks the box on each of these core functionalities of a top-tier DDP, allowing healthcare providers and domain knowledgeable personnel the ability to affect change in the health of a member population.

DignifiHealth



DignifiHealth (DH) aims to democratize healthcare. Offering a seamless suite of healthcare solutions and health management technologies, DH reduces cost, saves time, and provides better experiences for patients, employers, providers, and payers. DH connects stakeholders on multiple sides of healthcare in an effort to better manage chronic conditions and improve health by engaging individuals under whatever title they may currently be carrying, be it patient, employee, health plan member, or other.

All companies are healthcare companies whether they realize it or not. This is evidenced by the fact that most company's employee healthcare spend is among their highest expense items. DH offers insights and incentivizes preventative care so that outcomes may be improved and costs may be lowered.

DignifiEngage acts as the central hub of the DH platform and is the clinical intelligence and brain connecting the data flows of all other DH platform products and offerings. Whether engaging DH via telehealth, remote patient monitoring, activity tracking, or assessing gaps in your personal medical record, DignifiEngage uses real-time predictive analytics and machine learning to offer care insights for personal health management as well as population management.

Focused on the healthcare supply chain and customer / patient impact, DH fulfills all the requirements of a DDP and allows stakeholders of any skill level access to advanced business rule authoring, decision management, predictive analytics and machine learning, and rapid decision iteration.

Business Rule Authoring

DH empowers healthcare providers of any technical experience to design and author advanced clinical rule sets. Like InRule, discussed in the Forrester study, DH agrees that domain knowledge experts drive better decisions, knowing the right questions to ask at the right time for the right outcome.

With an intuitive yet powerful decision support engine, users can design rules and categories around variables such as diagnosis codes, procedure codes, prescription therapies, lab results, vital sign readings, and more. The user may also combine clinical indicators with demographics profiles, census bureau variables, FDA classifications, and other available data sources. Stack and combine rules to make advanced patient identifications well beyond the capabilities of Electronic Medical Records (EMR).

Rules can be used for patient identification and reporting or taken further and turned into real-time patient flagging. Rules are triggered at every level of patient interaction, providing point-of-service clinical insights, behind the scenes event triggering, direct patient engagement and intervention, and confidence that data is being used to its fullest potential.

Although the DH platform is conveniently pre-built with the rules and analytics needed to be successful in any value-based payer contract, user creativity is the only limiting factor to what can further be achieved in the DH decision support engine.

Decision Management

Building on the rules engine capabilities, the crushing administrative burden that accompanies today's value-based contracts is minimized if not alleviated with the DH platform. One of the largest gaps in most health systems is the ability to identify risk. What patients need attention? Which patients are going to arrive in my Emergency Department? What is the biggest care need for a group of patients? These questions and many more leave systems working in an extremely manual fashion with lagging payer data to comb through medical charts and identify gaps in care, all on a post-facto rather than proactive basis.



Right Patient

Daily-updated full risk stratification so you can focus on the patients who need you the most, curbing costly ER utilization and readmissions



Right Care

Sophisticated rules engine and gap analysis ensures patients receive the personalized, evidence-based, preventative care they need



Right Time

Actionable, data-driven insights at the point-of-care so your providers can focus on their patients instead of their computer screens

With DH, these questions are answered real-time in a few clicks of a button. In an intuitive and simple design, identify all patients with multiple chronic disease conditions, the typical 3.5% of patients who make up 50% of the risk, all diabetic patients who have not had a Hemoglobin A1c, and any number of

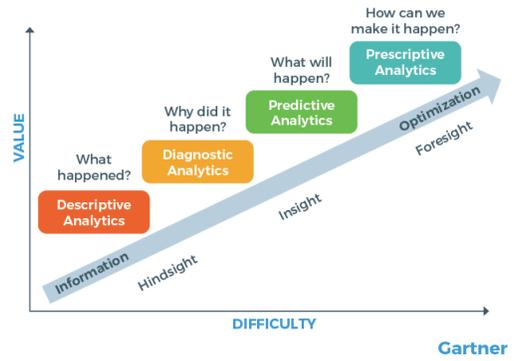
other metrics tied to value-based payer contracts.

Decision management is automated and any number of patient identification answers are at one's fingertips. Where many health systems today rely on personnel with database management or SQL reporting skills, who typically are not clinically minded, DH turns anyone in the organization into an advanced clinical report writer with minimal technical experience necessary, most importantly, on a real-time rather than retrospective basis.

Predictive Analytics & Machine Learning

Like FICO identifies risk in the financial services industry, DH is doing so in healthcare. Where FICO may review one's compliance with monthly loan payments, DH reviews one's compliance with evidence-based preventative best practices. Where FICO identifies individuals out of balance in their leveraging of debt, DH identifies individuals uncontrolled in their chronic disease management.

With DH, while users can build custom rules and make on-demand patient identifications, sophisticated machine learning (ML) algorithms are being constantly run in the background against the data, triggering event responses and actions which prompt users, providers, and even patients of needed interventions. Not only can these notifications be triggered real time, but they will also be made available to both provider and patient at the patient’s next scheduled care appointment, ensuring needed care does not slip through the cracks of a disjointed healthcare system.



ML insights then put the full power of predictive analytics in the hands of providers, health systems, and payers. The ability to identify pre-conditions like Chronic Heart Failure, Diabetes, COPD, and others allows intervention to occur to mitigate, delay, or even prevent costly diagnosis and poor patient outcomes. First class preventative care can be offered, producing better outcomes at significantly lower costs.

DH not only allows the ability to identify and estimate “what will happen” through predictive analytics, but further provides tools for outreach and engagement, using prescriptive analytics to say “how can we make it happen”. Turning hindsight into insight, DH provides the foresight to prompt needed interactions and interventions with all healthcare stakeholders.

Rapid Decision Iterations

“What gets measured gets improved.” Typically attributed to Peter Drucker, this phrase has been widely accepted as obvious for decades and has been fully embraced by healthcare administrative teams. The problem is, as V.F. Ridgway pointed out in 1956, “not everything that matters can be measured. Not everything that we can measure matters.”

While they are important and have a place in management, healthcare administration has seen an obsession with scorecards, validation matrices, stop light reports, and more, rarely stopping to ask tough questions like, “What decisions am I actually making as a result of what this report shows me?”.

DH aims to measure the right metrics at the right time for the right patients so that the right actions may be taken for the right outcomes. Sort through the noise and see what is actionable at the point-of-care. Further, DH offers full scorecard availability around quality and gap closure metrics, provider performance, and more. Utilize internal peer benchmarking at the provider, specialty or department,

and organization level, as well as Medicare cost and utilization benchmarks. Get insight into performance with drill-down capability for immediate identification of opportunities, as well as the detail needed to act for improvement.

The Forrester Wave

The Forrester Wave seeks to plot companies based on the identified strengths and weaknesses along two axes: Strength of Offering and Strength of Strategy. A third variable, Market Presence, is used to represent relative company size or intensity on the plot, with the plot grid and relative placing of each company determining whether each is a market Challenger, Contender, Strong Performer, or Leader.

Given that the full DH platform is pre-sales and is set to launch in the July / August 2021 time frame, market presence presents a challenge for assessment. Using a subset of the scorecard evaluation metrics from the Forrester model, the below will analyze the DH platform by utilizing beta client response, sales validation response, and current / future technical capabilities.

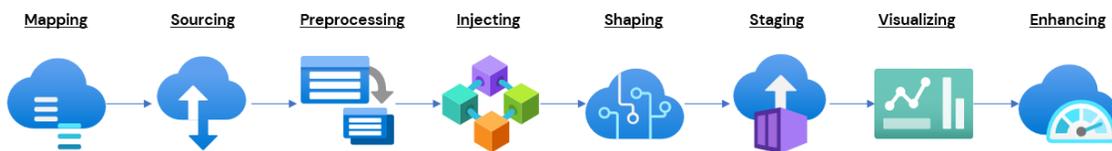
Strength of Offering

Data Integration

DH aims to accept data from any source in any format and will offer the ability to send data to any destination in any format. With a vision of true interoperability, DH will draw data from EMRs, payer claims data, pharmacy fill data, public Medicare and Medicaid data sets, FDA data, US Census Bureau data, third-party healthcare software, wearable device data, remote patient monitoring devices, and more. Data will be exchanged in flat file CSV format, HL7, FHIR, JSON, CCD, XML, and more, offering the latest technological integrations while acknowledging that most of the industry operates on legacy systems. DH will create a homogenous data lake environment from which all PAML and automation will function.

For beta customers of the DignifiEngage platform, data was able to be mapped and ingested from EMRs in less than 60 days. DH aims to be a market leader in time to onboard, offering the fastest route to customer ROI.

DignifiEngage Provider Data Pipeline



Platform

The DH platform is described by beautiful simplicity, ease of use, and most impressively, speed. While offering flashy visuals and scorecards which appeal to executive personnel, DH knows that front line staff make up the bulk of the user base. DH is therefore unintimidating, intuitive, and requires minimal training or technical ability to be able to utilize the platform to its fullest – all while providing the latest in PAML and automation in the background, empowering healthcare users at any level.

Built on a world-class fintech base, DH brings the sophistication of fintech into a much-needed healthtech application. From the ability to facilitate Health Reimbursement Accounts with a DH credit card, to virtual wallets and incentivization of care, to offering banking functions like provider loans, and a vision of real-time claims adjudication, the fintech underpinnings of the DH platform extend the possible in any clinical setting.

Feedback from beta customers of DignifiEngage, as well as sales validation engagements, has been overwhelmingly positive. From seeing hospital Quality departments revolutionize their workflow, to increasing provider clinic throughput, and more, it has been called “indispensable”, “the missing link”, and “the best population health platform we have seen.”

Strength of Strategy

Ability to Execute

After product, execution is the number one priority. DH knows that SaaS companies live or die by their ability to execute with customer onboarding, account management, customer service, and ongoing stickiness for contract renewal. For this reason, the very first high-level hires are for these purposes. DH has further taken very strategic investment partners with vast account management experience which will enhance and guide the mechanisms needed for hyper growth.

Solution Roadmap

DH provides solutions for providers, patients, employers, and payers. While individual pieces of the DH platform can be found in the existing competitive marketplace, one is hard pressed to find a platform that offers a “single pane of glass”, with telehealth, triage, clinical insights, automation, risk stratification, remote patient monitoring, virtual wallet, chronic care management, and so much more all accessible from a single cohesive platform and experience.

Minimum Viable Product has been achieved with initial market reactions showing positive. The DH web and portal platforms will be available in the July / August time frame, offering full capabilities of telehealth, pharmacy benefit management, and clinical intelligence. The remainder of 2021 will see the additions of remote patient monitoring and chronic care management, while early 2022 sees the full capabilities of virtual wallet and gamification of wellness care.

Enablement

As addressed throughout this analysis, DH empowers healthcare users at any level and in any setting with clinical intelligence at the click of a button. As IBM and Tibco were described in the Forrester study, DH offers automation at every turn and can ingest, analyze, decide, and act upon patient data and events in real-time, standardizing processes so staff can focus on their patients rather than administrative burdens.

Bottlenecks in today’s healthcare operations include a lack of accessibility to advanced clinical reporting, manual and lagging data insights as payer claims are awaited, and no visibility into

where risk resides in a population. DH addresses each of these, enabling users to identify the right care for the right patient at the right time.

Partners

DH has built an impressive pipeline, gaining traction in conversations and partnerships with state Health Information Exchanges (HIE), primary care associations, clinically integrated networks, Accountable Care Organizations (ACO), Clinically Integrated Networks (CIN), and more. On the employer side, DH has signed engagements with national benefits brokers, offering a suite of employer benefit options to millions of accessible employee and member lives. With single digit percentage penetration into existing pipeline deals, DH more than achieves initial three-year financial projections.

Market Presence

Market Awareness

DH has a unique insight into market awareness and needs. The founding team of DH brings many decades of combined healthcare experience across all aspects of the healthcare spectrum, from providers, to payers, to administration, to mergers and acquisitions, to healthcare sales, the DH team began careers as customers who experienced the struggles and barriers present in today's healthcare workflow. Seeing firsthand the inefficiencies and crushing administrative overhead burdens of trying to offer first-class patient care, the DH team knew there was a better way.

DH sets out to be missionaries rather than mercenaries. With a vision of the democratization of healthcare, DH is driven to offer a holistic approach to a siloed industry, better experiences for burned-out providers, better outcomes for struggling patients, and true value through lower costs for all healthcare stakeholders.