

# OUTSIDE LINES

## A WHOLE NEW WORLD OF INNOVATORS

Since 2010, more than 90 - some say more than 300 – new innovators have entered the healthcare provider space! They come from all different spaces and backgrounds. From physicians who have banded together or large employer- and health plan-backed companies to major Silicon Valley type tech start-ups backed by millions of dollars in venture capital. They are providing care like never before – the way the patient is asking for it. Urgent care, primary care, tele-visits, on-site medical clinics, online social communities to educate and engage patients... They are bringing back house calls, providing tools for consumer healthcare shopping, allowing people to bid for surgeries online, and the list goes on. Everyday, I hear of another new company. It's exciting. It's challenging. Outsiders with new tools, and with an understanding and ability to tap consumers in ways that healthcare has traditionally not known, are re-inventing the industry all around us.

So what to do? How do we swim in this tidal wave of change? Do we watch and let it go, expecting that the innovators will be contained on the fringes of our industry? Or do we plunge in, working to guide and plot this new course forward?

Strategy Advantage is a healthcare strategy company, so



Kim Athmann King, MBA, FACHE  
Founder & President  
[Strategy Advantage](#)  
[kking@strategyadvantage.com](mailto:kking@strategyadvantage.com)



our viewpoint is clear on this. We believe in organizations that pro-actively steer to the next horizon, digging in and working to understand and translate the trends. We believe in organizations that choose to lead toward the future. The world is changing. The innovators have opened a Pandora's box. And our consumers are wide-awake on this, hungry for new answers, better access, and new solutions.

This can be overwhelming. For some, it's invigorating. Either way you look at it, though, it's a call to action for leaders. There is much you can do, big and small, today and tomorrow, including:

- Be in the know. Follow and stay on top of the innovators. Host an executive briefing at your location on this topic, and start (and continue) the conversation.
- Look at your current strategic plan. Where is innovation factored into it? Pursue a rapid action review of what you're already doing to specifically re-jigger your plan to include new strategies.
- Examine your current capital investment decisions. How are you re-inventing your business model and planning for new sources of revenue? Where does innovation line up with this? And how much of your strategic capital is being allocated to innovation initiatives?
- Adopt the reality of the healthcare consumer, and develop your consumerism strategy now, in concert with your innovation strategy.

Chief financial officers from across the country recently met for a [Wall Street Journal CFO task force meeting](#), and came away with five top recommendations. Two of the five priorities spur us on to action. Specifically, they recommend that: 1) CFOs bring broad perspectives, to be a thought leader for and with their CEOs, and to thoroughly explore alternatives, and 2) Organizations recruit and develop innovators, noting that talent is what drives innovation and that there is a need to hire more employees who are willing to challenge the status quo.

Let's do this. Let's embark upon this world of innovators and know them, join them, and work together to create and shape healthcare for the better, for today and into the future.

Always looking ahead,



Kim Athmann King, MBA, FACHE

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## NEWS ALERT! WHAT'S HAPPENED THIS WEEK

The King v. Burwell decision on June 25 is major news – and something everyone in America is touched by. With this decision, access to healthcare is further assured. Also, another news item in [Healthcare ITNews](#) on June 15 – while not in the mainstream, headline news – points to another something that Americans will increasingly be touched by, and suggests healthcare access in new and different ways. The story announced “a third wave of digital” that is coming to the healthcare industry first. Different from the first wave of internet in the 1990s and the second wave of mobility in the early 2000s, the third wave includes “transformative digital living services” like at-home self-tracking and wearable devices, mobile platforms, and other tools to help consumers manage chronic diseases and wellness. According to the article, “living services will change consumer experiences and affect our lives in a much deeper and more positive way than mobile and Web services have.” Really? I hope they're right. If so, bring it on!

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## WHO WE'RE WATCHING

In this time of reform, innovation and consumerism, a myriad of healthcare solutions will need to be explored, tested, and advanced forward. Digital “living services” might be one set of innovations that will make a difference, especially for the “DIY” (do it yourself) style of healthcare consumers. For others, home-based medicine might provide another part of the answer. Last week, [Forbes](#) wrote about Heal, Pager, Dose, Curbside Care, and other house call start-up companies. In the mode of “ We have been tracking different house call programs and companies for some time, and have included these in our ZIGZAG Healthcare library. We'll be launching ZIGZAG online in mid-July. Contact me if you want to hear more.

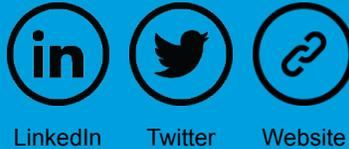
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## WHAT'S TRENDING

On the more traditional side of healthcare leadership and innovation, there are some things that seem to never change. One of these relates to the strategic imperative for hospital and

physician alignment. More than ever, we have to do this, and not just do it, but do it well. According to a [Forbes story](#) on June 23, “we’re starting to see the seeds of problems.” The story referenced a [2015 Bain & Company national survey](#), noting “we believe that we’re heading for a period of greater tension in the historically uneasy relationship between physicians and healthcare facilities. Physicians are not confident that their institution has the right organizational structure in place and they feel substantially disengaged from the decision-making process. This discord could lead to a slowdown or even a reversal of physician employment trends.”

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You are receiving this e-mail from Kim Athmann King

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Strategy Advantage  
1601 N. Sepulveda Blvd.  
#790  
Manhattan Beach, CA 90266

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