

Jump-Starting a New Market:

At-Home Health Tools for
Affluent Households,
Military Families, and
the Mainstream Market Beyond

Monday, October 22, 2007

Boston, MA



Teaching
Affiliates of



HARVARD
MEDICAL SCHOOL

Panelists & Perspectives

Bill Turner, *Manager of Business Development and Operations, ADT WellHealth*

John Henderson, Ph.D., *Richard C. Shipley Professor/Faculty Director, Information Systems Dept, Boston University School of Management*

Rob Scheschareg, *Vice President, Digital Wellness, Collective Integrators Alliance*

ADT® WellHealth™ Process and Infrastructure

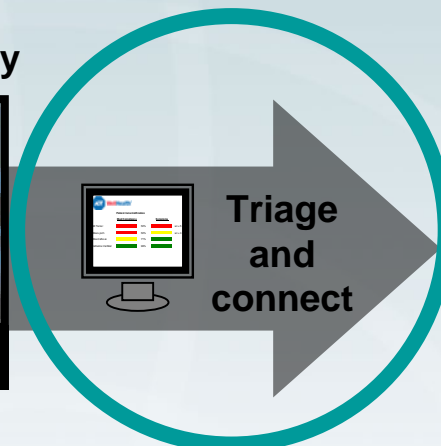
ADT Value

- Best devices and health services
- Connected with ADT for complete solution



Alerts

Verify / Notify



- Conduct daily survey
- Remind to take meds
- Verify status if an alert
- Notify healthcare providers and family
- Provide help 24/7



Physician



Health Coach



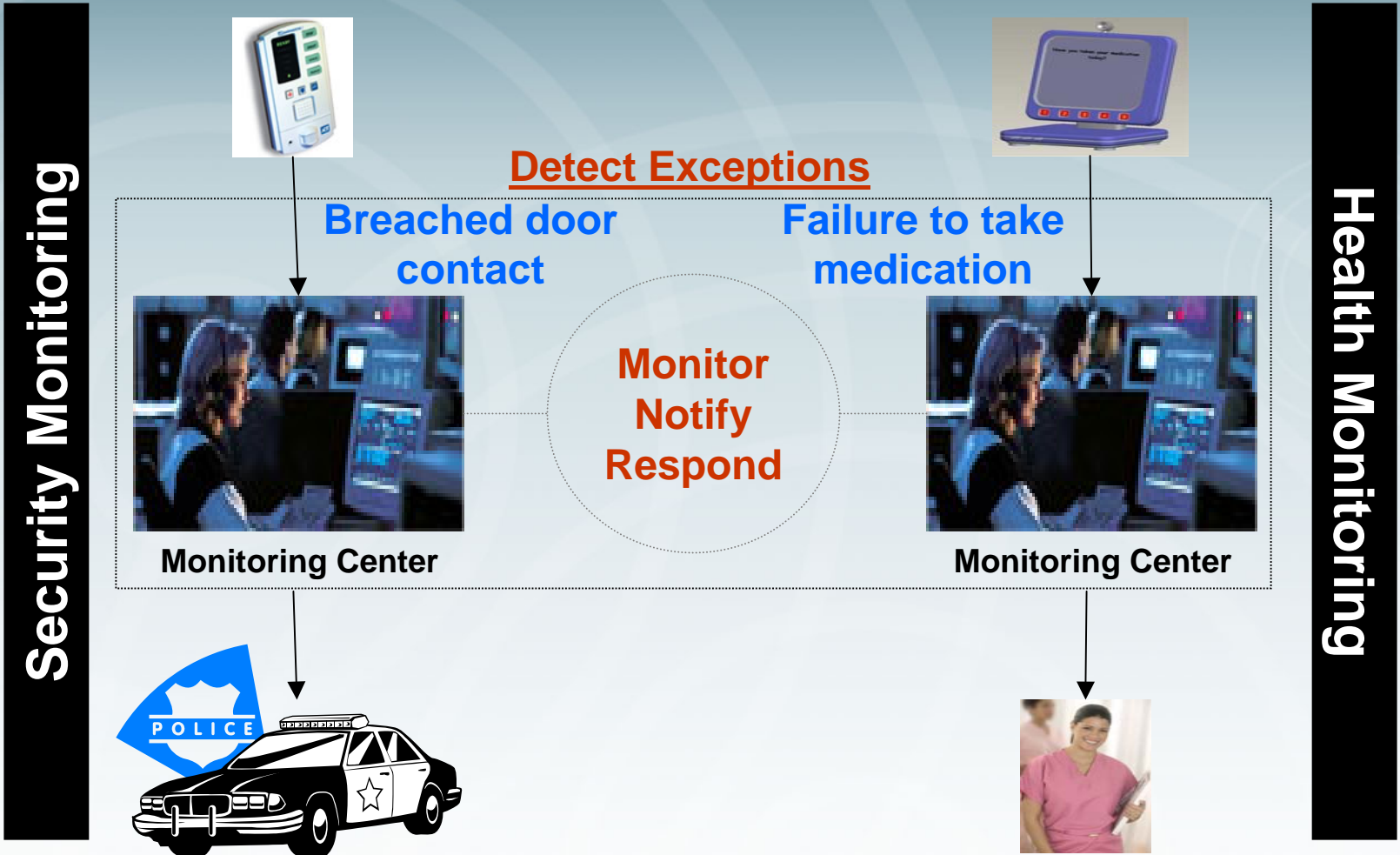
PBM



EMS

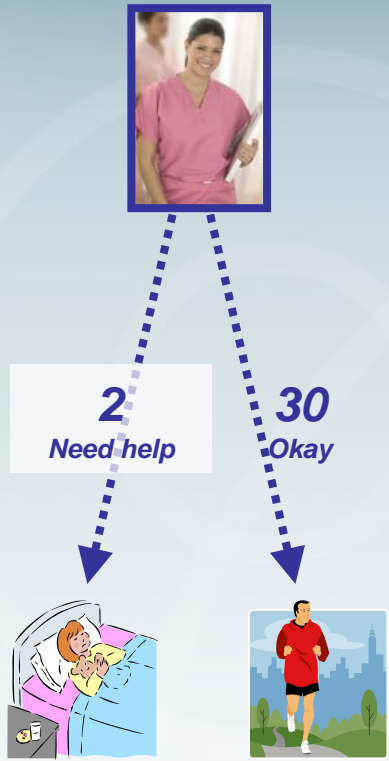
Your healthcare providers

For Both Security and Health Monitoring – 3rd Party Monitoring Essential to Function and Scale



ADT[®] Increases Nurse Caseload To 4X Traditional Disease Management

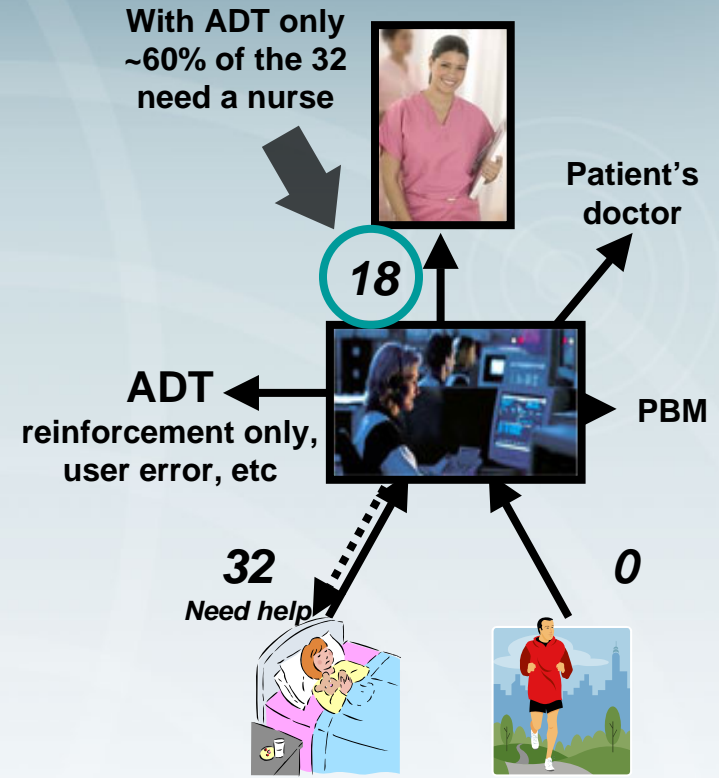
Traditional DM



Tech-Based DM



ADT WellHealth



Nurse-to-patient ratio = ~320

Nurse-to-patient ratio = ~640

Nurse-to-patient ratio = ~1100

Assume: 32 calls per day per nurse- actually speak to a patient; in trad. DM a patient is called once every 14 days; in tech-based DM assume 5% of population alerts a day (based on device supplier experience); in ADT WellHealth assume only 25% of the 5% of alerts are passed to a nurse (based on current implementation)

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John Henderson, PhD

- ✓ *Richard C. Shipley Professor/Faculty Director*
- ✓ *BUILDE*
- ✓ *Information Systems Department*
- ✓ *Boston Univ School of Management*
- ✓ *Specialty Concentrations:*
 - *Strategic Impacts of Information Technology*
 - *Strategic Partnerships*
 - *Knowledge Management*
 - *Mobile Internet*



Collective Integrators Alliance

- ✓ National network of custom electronics integrators
- ✓ Design, install and monitor custom home health & wellness networks and integrated services
- ✓ Focus on high-end homes, communities, MDU's

Applications

- Integrated Fitness systems
- Medical Concierge Services
- Eldercare Monitoring & Assistance



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Delivery of Healthcare Services Into the Home Is Inevitable

- Characteristics of this new market
What do consumers want? Pay for? Listen to?
- We've see this before - what early adopters & other industries are teaching us.
- How does it scale? Doctor-centric does not scale.
- Physicians Losing Control or Gaining Strategic Partners?
- Keys to adoption and revenue generation?

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Splitting the Pie

- How Much Must I Really Own?
 - *Money*
 - *Treatment Decisions and Services*
 - *Empowerment/Control*
- Removing Barriers
 - *What elements of your services, and the HC system, impact/drive the satisfaction and empowerment of your patients, you and your institution?*
- Delivering on A Large Scale
 - *Providing custom, distributed, networked care services to millions*

Final Thoughts & Next Steps

Delivery of healthcare into the home is inevitable, as consumers will increasingly spend out-of-pocket in 2008 for your service, but in ways they dictate.

- 1. Who should audience members seek out at this conference?*
- 2. Who must they seek out by the end of the year?*
- 3. What are the key questions I should answer?*

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Thank You!

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