Healthcare Trends 2024

**Runaway Costs and Patient Demands
are Driving a Rush for New Solutions**

CapTech®

> "The history of medicine has been written as an epic of progress, but it is also a tale of social and economic conflict."

Paul Starr
The Social Transformation of American Medicine

This duality seems even more stark today, as last year's trends continue to accelerate.

On one hand, advancements like machine learning (ML) and artificial intelligence (AI) promise to optimize care models and interoperability. On the other hand, runaway healthcare costs are exacerbating challenges from the patient's perspective, amplifying demands for improved satisfaction and most importantly, healthcare delivery quality.

To answer the call, the healthcare industry is in a frenzy of innovation, pivoting to address rising costs and expectations. These shifts, fueled by the need to bridge the gap between conflict and progress, are igniting new trends and reshaping the healthcare landscape.

Executive Summary

Our dive into the healthcare landscape reveals that last year's trends show no sign of slowing down. Fueled by the catalytic power of emerging technologies like AI, these trends are poised for growth, and a deepening urgency for accessible and affordable quality healthcare is pushing the boundaries of innovation.

01 Rising Costs Will Continue Widening the Health Equity Gap, But AI Can Help

- Healthcare costs will increase between 6.5% and 8.5% by 2028.
- Cost drivers include inflation, labor shortages, tech advancements, and drug prices.
- AI could save billions through optimization and automation.

02 Legislation Will Focus on Price Transparency

- Most hospitals don't post complete pricing information.
- Few hospitals are fined for transparency noncompliance.
- Congress will push for more transparency in procedure costs.

03 Interoperability and Integrated Care Models Will Grow in Importance

- Interoperability improves outcomes by enhancing care coordination, empowering patients, and driving innovation.
- Lack of interoperability hinders decision-making and personalized treatments.
- Most hospitals now use electronic methods for exchanging patient information, but it's not enough.

04 New Technologies Will Continue to Drive Advancements

- AI can streamline vital tasks and enhance diagnostics to mitigate human error.
- Augmented and virtual reality are improving accessibility, costs, and care delivery.
- AI-powered 3D printing will improve prosthetics, surgical implants, and surgical training.
- The race to integrate generative AI into healthcare products will accelerate.

05 Micro-services Will See a Significant Expansion

- Declining profits are pushing hospitals to focus on outpatient and alternative care models.
- These more accessible services are addressing staffing challenges, financial viability, and regulatory hurdles.
- Insurance companies play a big role in steering consumers toward these services.

06 Attrition Will Worsen, But New Solutions Show Promise

- Shortages of primary care physicians and nurses are worsening.
- Employee attrition analytics can improve retention.
- Telehealth and remote patient monitoring is easing the burden on overstretched providers.
- AI-powered diagnostics are supplementing providers' capabilities.

07 Companies Will Ramp Up Innovation in Digital Patient Experience

- Consumers expect a frictionless digital healthcare journey.
- Omni-channel approaches are providing immediate access to primary care.
- Life sciences companies have begun driving patients to treatments directly.

01

Rising Costs Will Continue Widening the Health Equity Gap, But AI Can Help

As we look forward, the healthcare landscape faces continued, almost insurmountable challenges, with the escalation of healthcare costs being a primary industry concern. According to Centers for Medicare and Medicaid Services (CMS), healthcare expenditures are projected to increase between 6.5% and 8.5%,[i] eclipsing previous yearly benchmarks on its advancement to an estimated $6.2T by 2028.[ii] Contributing to the rapid growth are a series of various factors, including inflation, labor shortages, demographic changes, technological advancements, and the soaring costs of prescription drugs.

Drivers of Escalating Costs

Labor Shortages
Staffing shortages lead to an increase in salaries, yielding higher reimbursement requests and an upward trajectory of healthcare costs. And limited resources may cause accessibility issues and impact health equity disparities throughout care models.[iii]

Patient Care Technological Advancements
The increased use of technology-intensive patient care is expensive, requiring capital expenditures and staff training. Medical technology accounts for approximately 10% to 40% of rising health care costs as insurance removes financial barriers.[vi]

Shifting Demographics
Demand for all health-related services, including hospitals and long-term care, is set to contribute to the overall rise in service costs.[iv] In addition, we expect that catastrophic claims and chronic conditions will push medical plan costs to pre-pandemic levels.

Soaring Drug Costs
Specialty drugs represent over 50% of total drug spending in the United States, as many Americans are dealing with chronic and complex healthcare issues.[vii]

Inflationary Pressures
Inflation has driven up input costs, compounded by ongoing clinical workforce shortages.[v]

Rising costs are impacting patient care and raising significant concerns about access, affordability, and the widening health equity gap in America. Burdened by financial constraints, patients often postpone medical treatment or spend beyond their means; indeed, according to a Gallup poll, 25% of Americans say that they or a family member has put off treatment for a serious condition in the past year due to costs.[viii]

Additionally, stakeholders in the healthcare sector, including payers and providers, are impacted by these rising costs both individually and in competition, as reimbursement negotiations rarely occur more than once a year. Squeezed by lower margins, many will look to technology to provide a financial and competitive edge.

AI Can Help Close the Gap

To combat this concerning trend, AI can make impactful changes to healthcare costs by:

- ✔ Optimizing non-clinical operations

- ✔ Automating administrative task management

- ✔ Optimizing hospital staffing allocations

- ✔ Improving call center operations

- ✔ Improving patient scheduling solutions

- ✔ Automating billing and facility management

If we continue using AI to assist with fraud detection, it can save up to a possible $200 billion annually.

Ultimately, all of the ways in which AI can be used to reduce costs could collectively free up to $150 billion annually, and if we continue using AI to assist with fraud detection, it can save up to a possible $200 billion annually.[ix] CapTech's AI-powered fraud detection system, for example, saved an insurance provider $30 million at-risk dollars and decreased model delivery timelines by 60%.
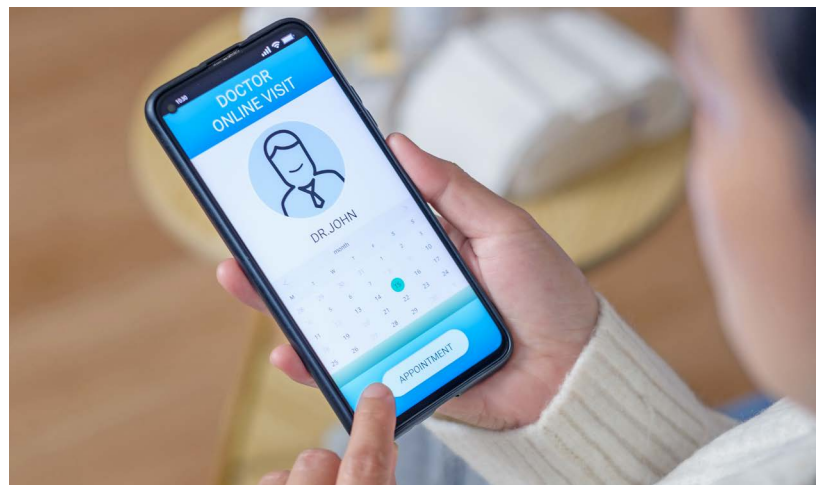
Longer-term technological strategies include medical management, value-based care, and data-driven decisions to increase the efficiency, outcomes, and affordability of healthcare services. These efforts are aligned with the general understanding that a healthier population will lead to lower healthcare costs. For the most impactful changes, health organizations should continue to invest in new technologies to reduce healthcare utilization, achieve improved health outcomes, and better manage chronic disease.

Legislative Initiatives Will Address Price Transparency

02

In 2024, both the US Congress's and CMS's legislative and regulatory initiatives will focus heavily on price transparency. The goal is to empower patients to more clearly understand costs associated with clinical procedures, durable medical goods, and, most notably, prescription drugs. Specifically, government policy will focus on the regulation of Pharmacy Benefit Managers (PBMs) and the enforcement of hospital pricing transparency.

Prescription Drug Pricing Transparency

A PBM is a third-party entity that negotiates costs and rebates, builds networks, and can also conduct utilization reviews. These companies function as intermediaries between insurance providers and pharmaceutical manufacturers.

An important but hidden value chain between a pharmacy and manufacturer, the average citizen likely doesn't know PBMs exist, yet they play a major role in prescription drug pricing. In the early days, PBMs were harnessed as a mechanism for managing a significant amount of low dollar but high-volume medical claims. Over time, PBMs became a double-edged s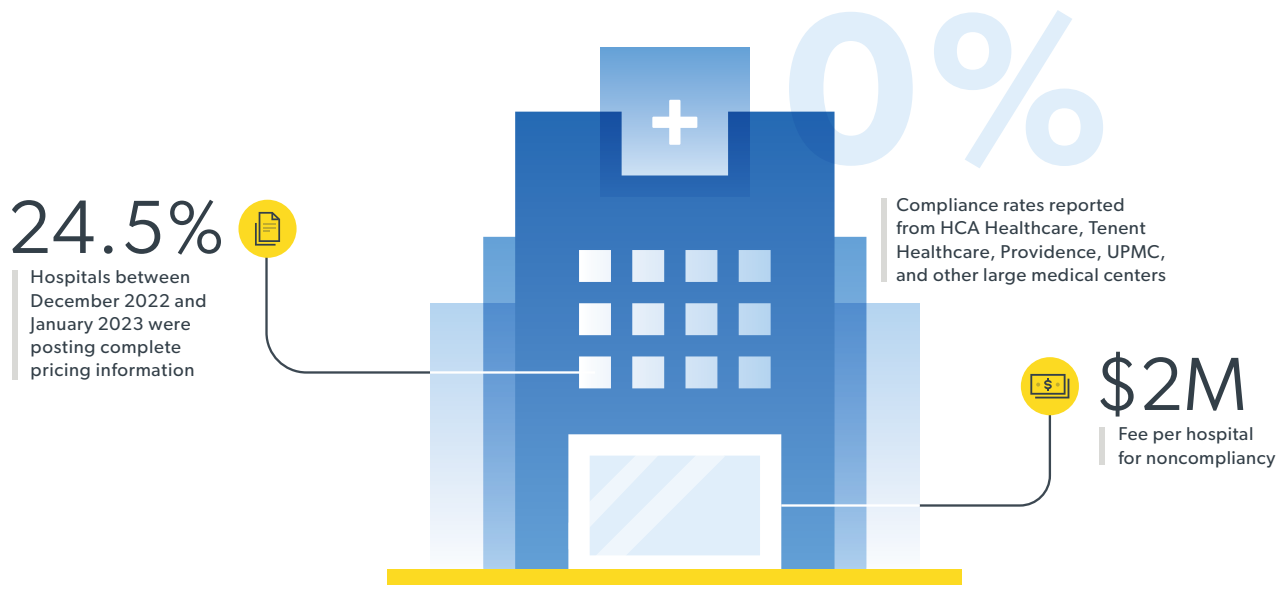word. While they began creating innovations in healthcare value, they also increased pricing ambiguity, out-of-pocket costs, and deductibles.

The goal is to empower patients to more clearly understand costs associated with clinical procedures, durable medical goods, and, most notably, prescription drugs.

We anticipate that Congress will focus on a series of legislative initiatives aimed at both continuing to cap certain prescription drug costs, as well as reducing, eliminating, and/or sharing rebate benefits with customers. While there are certain rebate benefits that customers share, these rebate scenarios don't allow customers to apply the cost of the prescription against their annual deductible accumulation.

24.5%

Hospitals between December 2022 and January 2023 were posting complete pricing information

0%

Compliance rates reported from HCA Healthcare, Tenent Healthcare, Providence, UPMC, and other large medical centers

$2M

Fee per hospital for noncompliancy

Hospital Price Transparency

In addition to focusing on regulating and controlling PBMs, we expect an added push to provide more transparency in healthcare procedure costs. Previous legislation and subsequent rules defined by CMS are requiring hospitals to publish costs. These first went into effect in 2021, but now CMS regulators are pushing for added fines for non-compliance, even after increasing the noncompliance fee from over $100,000 a year to over $2 million per hospital,[x] which creates a financial strain that may prove unbearable for many healthcare organizations.

But until pricing transparency is led by insurers who clearly understand their network negotiated rates, we anticipate a significant non-compliance with regulation until regulators ramp up the fines further and force compliance.

This view is supported by current data. Of 2,000 hospitals surveyed by PatientsRightsAdvocate.org between December 2022 and January 2023, only 24.5% were posting complete pricing information.[xi] Providers such as HCA Healthcare, Tenet Healthcare, Providence, UPMC, and other large medical centers reported compliance rates of 0%. A smaller CMS analysis of only 600 hospitals found that 70% were in compliance with website posting requirements.[xii]

Will hospitals comply, or will they continue to pay fines and civil penalties? And what financial penalty is the true breaking point?

According to MedCity News, as of April 2023, CMS issued over 730 warning notices and 269 requests for corrective action plans to hospitals not in compliance with pricing transparency mandates. But despite numerous of warnings, CMS has fined only four hospitals.[xiii]

Implementing Regulatory Change

It's safe to assume we'd all agree that the overarching goal is to have a high quality, lower cost, available, and equitable healthcare system. But how do we get there?

Government regulation certainly has a role to play in the process, but there isn't a legislative silver bullet. Public policy needs to be more tightly aligned with solving for the root cause and not focusing on an approach triggered by the loudest voice or deepest pocket.

Technical debt and data latency, for instance, are two of the biggest challenges hindering payers, providers, patients, and the entire health ecosystem from addressing many of the cost transparency issues we are facing today. In 2024, we will likely see healthcare players innovate through these root causes by combining price transparency with true real-time data analysis, directing payers and/or patients to lower cost, high quality care in real-time.

That's a good start, but unless these innovations truly provide a better healthcare system that drives down costs, improves quality and outcomes, and makes this system more available and equitable for citizens, there is still a long way to go. And the advancement of real-time data exchanges and the proactive engagement of patients, payers, and even the employers who pay claims on behalf of their employees, will only continue to drive the demand for lower costs, as well as better health outcomes. The entire health ecosystem has a role to play in meeting these demands equitably, for all of us.

The advancement of real-time data exchanges and the proactive engagement of patients, payers, and even the employers who pay claims on behalf of their employees, will only continue to drive the demand for lower costs, as well as better health outcomes.

TREND 3

Interoperability and Integrated Care Models Will Grow in Importance

The healthcare industry faces significant challenges in integrating care models and interoperability due to the lack of standardized data formats, coding systems, and communication protocols across the healthcare landscape. This fragmentation makes it challenging to exchange and analyze data seamlessly, hindering the ability of healthcare providers to make informed decisions and provide personalized treatments.

To address this issue, promoting standardized and seamless electronic data exchanges between healthcare providers, such as the HL7 Fast Healthcare Interoperability Resource, is crucial. This multifaceted approach involves technology, data standards, policies, and collaboration among key stakeholders. Qualified Health Information Networks (QHINs), a new initiative from the US Department of Health and Human Services (HHS), attempts to promote this type of free flowing data exchange, and recently debuted the first group of qualified networks.[xiv]

While there have been significant improvements in interoperability among health systems, there is still room for further enhancement, particularly in rural and small hospitals. According to HealthIT.gov, as of 2021, approximately 88% of hospitals have adopted electronic methods for sending and receiving patient health information, either through querying or electronically receiving summary of care records. The integration of patient health information into Electronic Health Records (EHRs) has also seen substantial growth, with a 40% increase in the number of hospitals engaged in this activity since 2017. Currently, about three-quarters of hospitals actively integrate patient health information into their EHR systems.[xv]

Improvements of interoperability in healthcare systems

SINCE 2017

Increase in the number of hospitals engaged in the integration of Electronic Health Records

40%

88%
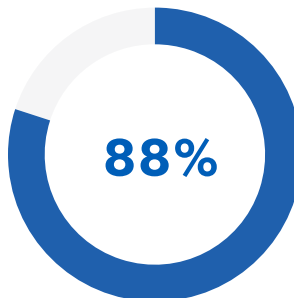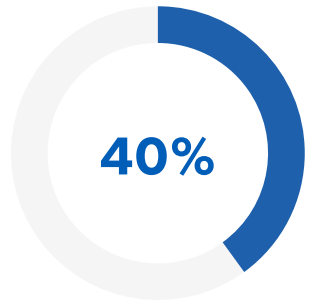
SINCE 2021

Hospitals have adopted electronic methods for sending and receiving patient health information

The integration of care models and interoperability brings forth several positive outcomes. When healthcare professionals have access to comprehensive patient information through interoperable systems, they can make more informed decisions, reduce medical errors, and provide more timely, appropriate, and personalized care.

Furthermore, interoperability enhances care coordination and collaboration by enabling seamless sharing of patient data across different healthcare settings. This streamlines administrative processes, reduces duplicate tests, and eliminates unnecessary procedures, resulting in increased efficiency and cost savings.

enable population health management by aggregating and analyzing data from various sources. This proactive approach provides insights into disease patterns, identifies high-risk populations, and supports targeted interventions and preventive measures, ultimately improving overall population health outcomes.

Another significant benefit of interoperability is its contribution to research and innovation. By allowing the aggregation and analysis of large-scale healthcare datasets, interoperability facilitates research, clinical trials, and provides a foundation for evidence-based medicine, advancements in medical research, and the development of new treatments and therapies.
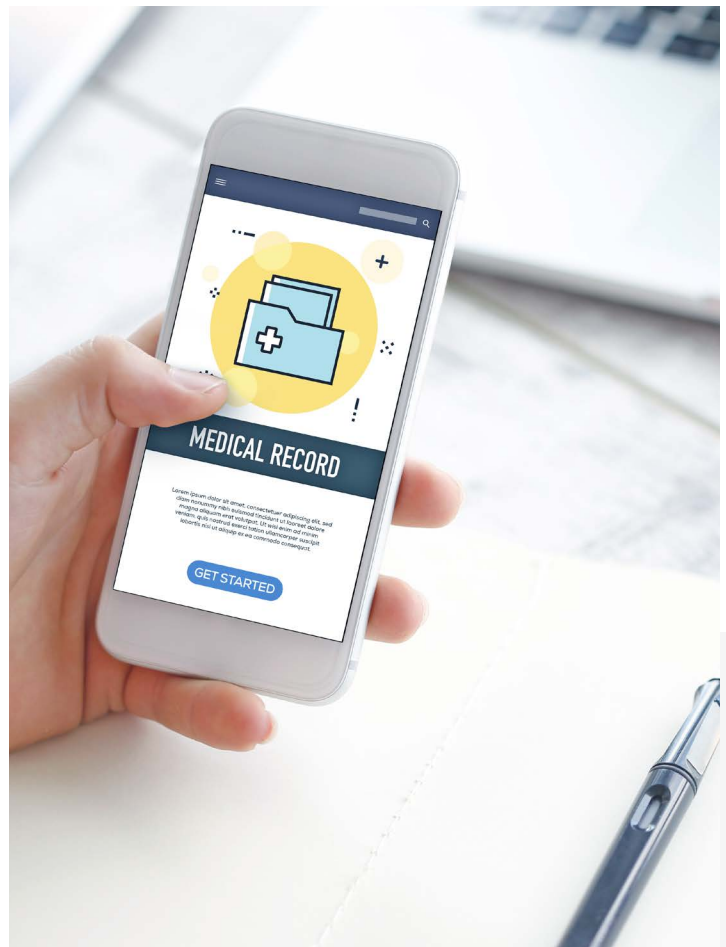
The integration of care models and interoperability brings forth several positive outcomes.

- ✓ Improved Patient Outcomes
- ✓ Enhanced Care Coordination
- ✓ Empowered Patients

Interoperable systems also empower patients by providing them with access to their own health information. Patients can view their medical records, track their progress, and communicate more easily with healthcare providers. This active engagement promotes informed decision-making and enables patients to actively manage their conditions, leading to better health outcomes. Additionally, integrated care models that incorporate interoperable systems

Despite the clear benefits of an integrated health system, it is essential to address certain issues to ensure the successful implementation of integrated care models and interoperability. Sharing sensitive health information across systems requires robust security measures to prevent unauthorized access. In addition, overcoming technical challenges and financial constraints requires a collaborative effort among healthcare providers, policymakers, technology vendors, and regulatory bodies to realize the positive impact of integrated care models and interoperability on the healthcare landscape.

An Interoperability Success Story

The Wisconsin Statewide Health Information Network (WISHIN) is a pioneering Health Information Exchange (HIE) that has achieved Data Partner certification, making it one of the first HIEs in the nation to do so. WISHIN is a statewide network that is vendor-agnostic, meaning it is compatible with various EHR systems. With over 2,150 sites of care across Wisconsin, WISHIN facilitates the exchange of data for more than 7 million unique patients. By connecting healthcare organizations and streamlining data collection, WISHIN reduces the burden of data collection and ensures the integrity of the data from the original source system.

Additionally, WISHIN has a positive impact on Healthcare Effectiveness Data and Information Set reporting efforts by enhancing performance rates for health plan participants. Hospitals that connect with WISHIN can qualify for incentive payments of up to $120,000 each, further incentivizing participation in this valuable health information network.[xvi]

New Technologies Will Continue to Drive Advancements

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In 2024, the healthcare sector will experience a continued rise of technological advancements poised to redefine patient care and healthcare delivery, reshaping the industry and enhancing overall medical outcomes.
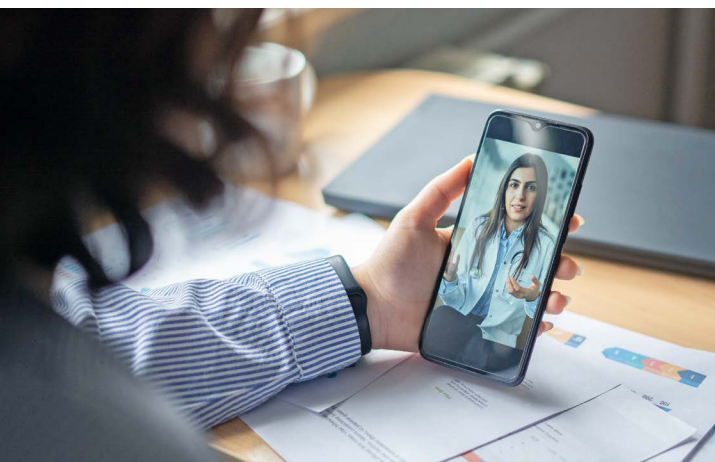
Integrated AI Workflows

The integration of AI into clinical and non-clinical workflows gives valuable insights to healthcare professionals, and supplements tasks such as managing medication, monitoring patient conversations for early signs of health issues, and forecasting valuable insights to medical teams. AI integration not only enhances the quality of patient care and associated outcomes, but also offers ways to mitigate rising costs through the automation of routine administrative workflows, solutions that address labor shortages, and streamlined

operations, which can yield a more sustainable system.

Through AI, healthcare organizations can improve clinical outcomes while addressing the growing health disparities and inequities that, left unchecked, will prevent the economic viability and accessibility of health systems.

Preventive and Personalized Medicine

As the industry continues attempting to shift the paradigm from acute to preventive care, AI is playing a crucial role in revolutionizing healthcare by enabling early intervention and personalized medicine. This is instrumental in allowing for profound diagnostics and disease detection, and can ultimately lead to long-term benefits for patients and reduced costs associated with treating preventable conditions. Furthermore, the integration of AI and wearable technology, such as Fitbits and smart watches, is enabling early warning and rapid intervention, indicating a significant shift towards a more proactive, personalized, and efficient healthcare system.

> **AI is playing a crucial role in revolutionizing healthcare by enabling early intervention and personalized medicine.**

Enhanced Diagnostics

AI-powered diagnostics are revolutionizing the medical industry, increasing speed, accuracy, and efficiency to ultimately mitigate the risk of human error and enhance clinical decision-making. With assistance from deep learning algorithms, AI-powered medical imaging solutions can automate processes, identify abnormalities, and detect diseases with greater accuracy than ever before. This helps relieve overburdened radiologists and tangibly improve accuracy of diagnostics and overall patient care quality.

Augmented Reality, Virtual Reality, and Telemedicine 2.0

The COVID-19 pandemic led to the acceleration and increased adoption of augmented reality (AR) and virtual reality (VR), now a growing market expected to reach $8 billion and $10 billion, respectively, in the next few years.[xvii] AR and VR are leveraged in a wide range of clinical applications, including training, patient education, and treatment. Additionally, these technologies are powering Telemedicine 2.0, expanding accessibility through remote monitoring and care delivery, minimizing costs, and enhancing overall delivery of care and patient outcomes through new capabilities such as micro-services.

3D Printing and AI

Futuristic possibilities are being brought to life through the union of 3D printing and AI. By analyzing patient scans, AI can enhance 3D printing precision and design custom implants catering to the anatomy of each patient. This hyper-tailored approach enables quicker adoption of prosthetic usage and better treatment outcomes for surgical implants. Additionally, the convergence of AI in 3D printing can provide models that simulate the surgical environment for training and educational needs.

Generative AI

Underlying these trends and continuing to drive a significant revolution in Healthcare IT is generative AI, which brings substantial improvements to various processes by relying on deep learning algorithms to create new content, analyze unstructured datasets, and drive innovations in healthcare operations. While generative AI is still in its earlier stages, given its promises of profound impact on numerous industries, including healthcare, the race will continue for integration into various healthcare products. AI is no longer a futuristic concept, but a prominent force shaping the future of healthcare.

Micro-services Will See a Significant Expansion

05

As the healthcare industry continues its transformative shift to non-traditional care models and innovative approaches to meet growing consumer demands, traditional hospitals and provider groups are finding it increasingly difficult to prioritize cost-effective, personalized, and accessible care.

One effect of this shift is a notable decline in hospital profits. For instance, many major hospitals, including the 138-hospital nonprofit system CommonSpirit Health, have experienced lower profits due to factors such as workforce shortages, rising costs, and an increasing preference for outpatient care.[xviii] Other large, traditional healthcare providers are facing similar challenges in meeting the demands of patients who, driven by escalating costs and the ever-widening wealth gap (25% of US adults say they or a family member had problems paying for health care in the past year)[xix] now seek cost-effective healthcare delivered at their convenience. Illustrating this shift from large network providers to outpatient facilities is the comparative example that the same procedure under Medicare can result in a staggering price difference of 40-80%.[xx]

This year, we expect the focus on outpatient and alternative care models to remain strong. As healthcare giants continue to align their

strategies to accommodate for this shift, we'll continue to see the ongoing integration of primary care, emergent care, and urgent care facilitated through a network of micro-hospitals, specialized care facilities, mobile health solutions, and telemedicine. According to Data Bridge Market Research, the US micro-hospitals market is projected to experience an 8% compound annual growth rate and surpass $455 billion by 2030.[xxi] Healthcare giants like HCA are at the forefront of this trend, expanding outpatient locations with a goal of 20 outpatient clinics for every inpatient facility.[xxii]
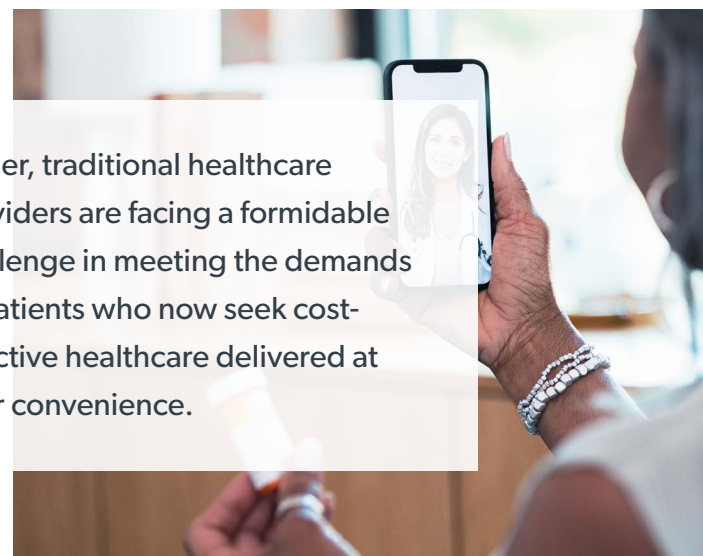
Larger, traditional healthcare providers are facing a formidable challenge in meeting the demands of patients who now seek cost-effective healthcare delivered at their convenience.

Consumers, empowered by retail technology and a desire for control over their healthcare, are increasingly seeking more personalized

and convenient options, as well as a localized healthcare approach focusing on quality of care, treatment outcomes, and overall satisfaction and accessibility.

As the government also continues to focus on social determinants of health outcomes, we can expect the system to continue expanding into more accessible micro- and integrated services that will address other system limitations, including staffing challenges, financial viability, and regulatory hurdles. All stakeholders within the healthcare industry share the urgency to adapt to these changing needs. While consumer expectations and accessibility are a driving force, it's equally urgent for insurers and providers to collaborate on negotiating comprehensive coverage in a cost-effective solution.

With all parties pushing innovative approaches, insurance companies may have the greatest role in steering consumers towards outpatient, localized facilities. Payers must continue to reevaluate coverage models, negotiate network inclusions with larger health networks, and provide incentives for positive outcomes. Success lies in the collaborative ability of healthcare providers, insurers, and policymakers to evolve and account for the needs of a population seeking a better, more efficient, and personalized healthcare journey.
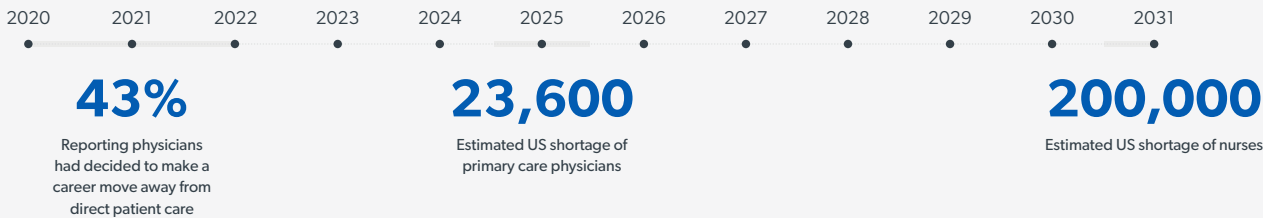
Attrition Will Worsen, But New Solutions Show Promise

The healthcare sector is grappling with the alarming reality of a significant provider shortage across all levels. A study published by Human Resources for Health estimated that by 2025, the US will be short around 23,600 primary care physicians,[xxiii] while a Mercer study expects a shortage of up to 200,000 nurses by 2031.[xxiv] This crisis, worsened by an aging population and tailwinds of the COVID-19 pandemic, has put an unprecedented strain on the healthcare system.

While large-scale demographic trends (including the aging population) certainly play a huge role in these statistics, provider attrition due to factors unrelated to retirement have increased at an alarming rate. A recent survey conducted by CHG Health revealed that between 2020 and 2022, 43% of reporting physicians had decided to make a career move away from direct patient care.[xxv]

The departure of healthcare professionals, whether from their current roles or the field altogether, represents a significant financial burden and disrupts medical services. Training new staff, particularly registered nurses, entails substantial costs, ranging from $28,000 to $52,000 per individual.[xxvi] Furthermore, the heightened turnover rates among nurses have compelled hospitals to rely on traveling nurses, a solution that incurs costs substantially higher than the salaries of regular staff RNs. An analysis by NSI Nursing Solutions suggests hospitals could save an average of $3 million annually by eliminating the need for traveling nurses.[xxvii]

IT solutions could serve as critical enablers to address these challenges; in fact, they are increasingly becoming an indispensable tool in helping to mitigate the provider shortages and aid in providing more efficient and accessible healthcare.

2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030 2031

43%
Reporting physicians had decided to make a career move away from direct patient care

23,600
Estimated US shortage of primary care physicians

200,000
Estimated US shortage of nurses

IT Solutions in Action

Employee Attrition Analytics

This technology goes beyond mere data collection; it's a proactive analytics engine that allows for visibility into the key factors that drive healthcare professionals to leave their organizations. These insights can be used to implement targeted strategies to improve job satisfaction and impact retention in a meaningful way. This proactive approach is vital in an industry where every experienced healthcare provider is crucial to a healthy system.

Telehealth: Expanding Access

Telehealth has redefined the boundaries of care delivery, especially in rural and underserved areas. By facilitating remote consultations, it reduces the dependency on physical healthcare facilities, thereby easing the burden on overstretched providers. This not only makes healthcare more accessible, but also more efficient, as providers can reach a larger number of patients in less time.
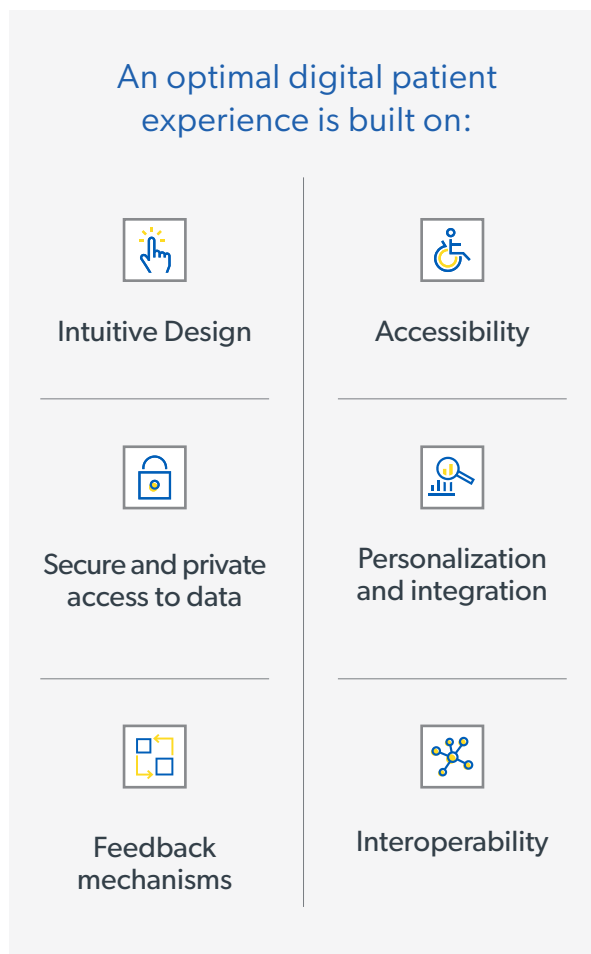
Additional IT Solutions

Several other IT solutions are making significant inroads, such as AI-powered diagnostics, which are supplementing healthcare providers' capabilities by offering quicker and more accurate diagnoses. Additionally, remote patient monitoring systems empower patients to manage their health proactively while ensuring continuous care and taking the burden off providers. Collectively, these technologies will play a pivotal role in the coming year in creating a more resilient healthcare ecosystem, marked by improved efficiency and accessibility.
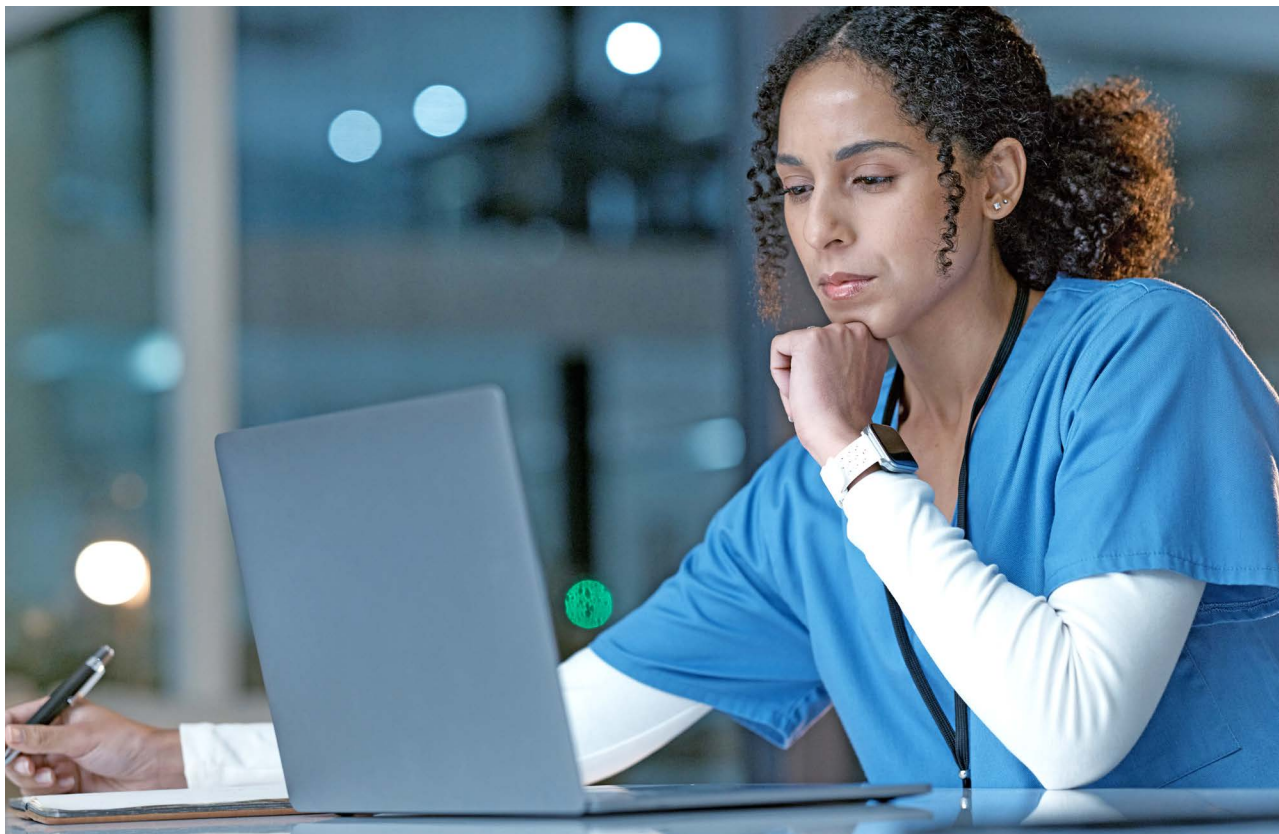
TREND 7

Companies Will Ramp Up Innovations in Digital Patient Experience

For consumers, a frictionless, convenient patient experience is not only necessary, but vital in how well they manage their health. Consumers expect the ability to digitally access and engage as part of their healthcare journey.

An optimal digital patient experience is built on:

Intuitive Design	Accessibility
Secure and private access to data	Personalization and integration
Feedback mechanisms	Interoperability

Health Insights through Digital Applications

One company that is driving digital innovation is Apple, which has dedicated an entire ecosystem to developing its own health applications that provide meaningful insights into individualized health and enable connection and collaboration with the medical community. Apple Watch and iPhone applications can monitor activity level, cardiac events, sleep, and blood glucose, provide medication reminders and noise notifications, and detect falls. Apple allows consumers to consolidate all health data in one central place, providing a more flexible, patient-centric approach to gathering a core data set.[xxviii]

Better Remote Care

Remote healthcare is a growing area that benefits patients and providers by expanding treatment access, enhancing patient monitoring capabilities, and lowering strain on the healthcare workforce. Partnerships between hospitals and digital companies have enabled the rise of remote care, which relies on digital technology to facilitate communication and collaboration of medical data. Among these technologies are tablets or virtual visits and wearables for collecting vitals remotely.

Seamless Experiences through Omni-Channel Approach

Consumers want to leverage tools and technology to access healthcare as a holistic experience. As they take further ownership of their own health, payers and providers need to understand how to leverage an omni-channel approach for a seamless integrated user experience.

Many digital-native companies are already using omni-channel interactions and experiences to grow their healthcare customer base. In our CapTech 2023 Healthcare Trends, we wrote about the impact of mergers and acquisitions, and how some retailers have expanded into the healthcare industry with a focus on personalizing the patient experience.

Recently, Amazon and One Medical have continued to disrupt the care model for

> **At the intersection of mobile and digital is the need for consumers to leverage tools and technology to access healthcare as a holistic experience.**

consumers by providing immediate access to primary care services (including same day or next day) using the One Medical Platform brick and mortar locations for a low monthly fee. Amazon Prime members also gain access to Amazon pharmacy and virtual on-demand care.[xxix] Similarly, Walgreens has a prescription management tool that makes it easy for users to refill medications using an omni-channel approach.

Direct Engagement from Life Sciences Companies

By harnessing new technologies like telehealth, life sciences companies have begun engaging with consumers in novel ways, such as driving patients to care models and pharmaceuticals directly. Eli Lilly, for example, recently launched LillyDirect, a website enabling people to order weight-loss medicine directly from the drugmaker. Lilly's direct-to-consumer platform will also allow diabetes and migraine patients to order products for home delivery.

Keys to a Better Future

As healthcare costs continue to rise and patient expectations increase, many stakeholders in and connected to the healthcare industry are leveraging every tool at their disposal to redefine how healthcare is delivered and experienced. From a legislative push toward transparency and a renewed focus on interoperability to the expansion of micro-services, new technologies, and seamless digital patient experiences, healthcare leaders are making strides toward a more equitable and efficient future.

As we look forward this year, it's important to remember that the more patient-centric approach exhibited by these trends, and the emerging technologies being used to make them a reality, are not just an option, but a necessity. The ongoing evolution of these approaches and technologies will drive a future where quality healthcare is accessible and affordable for all.

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