

Emerging mHealth: paths for growth

7 June 2012

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1. Executive Summary

Executive summary



Goal of the report

- Report assesses the market opportunities and challenges for mHealth from the perspective of patients, payers, and providers
- EIU report, commissioned by PwC, with analysis from PwC

Key findings

- Expectations are high for mHealth from patients, providers and payers
- Significant differences in adoption among emerging and developed nations
- Consumers are ready to adopt mobile health faster than the health industry is ready to adapt
- Solutions, not technology, are the key to success

About the research

Report surveys covered patients, physicians and payers

1

A **patient survey** with over 1,000 respondents— with a broad distribution of economic backgrounds, ages, levels of education and states of health

2

A **physicians survey** with 433 physicians — public and private sector, urban vs. rural, wide range of years in experience

3

A **payer survey** with 345 respondents — roughly evenly divided between public and private sector and 55% are C-suite or above

4

20 **in-depth interviews** with key experts

The survey included 10 countries:



Brazil



China



Denmark



Germany



India



South
Africa



Spain



Turkey



UK

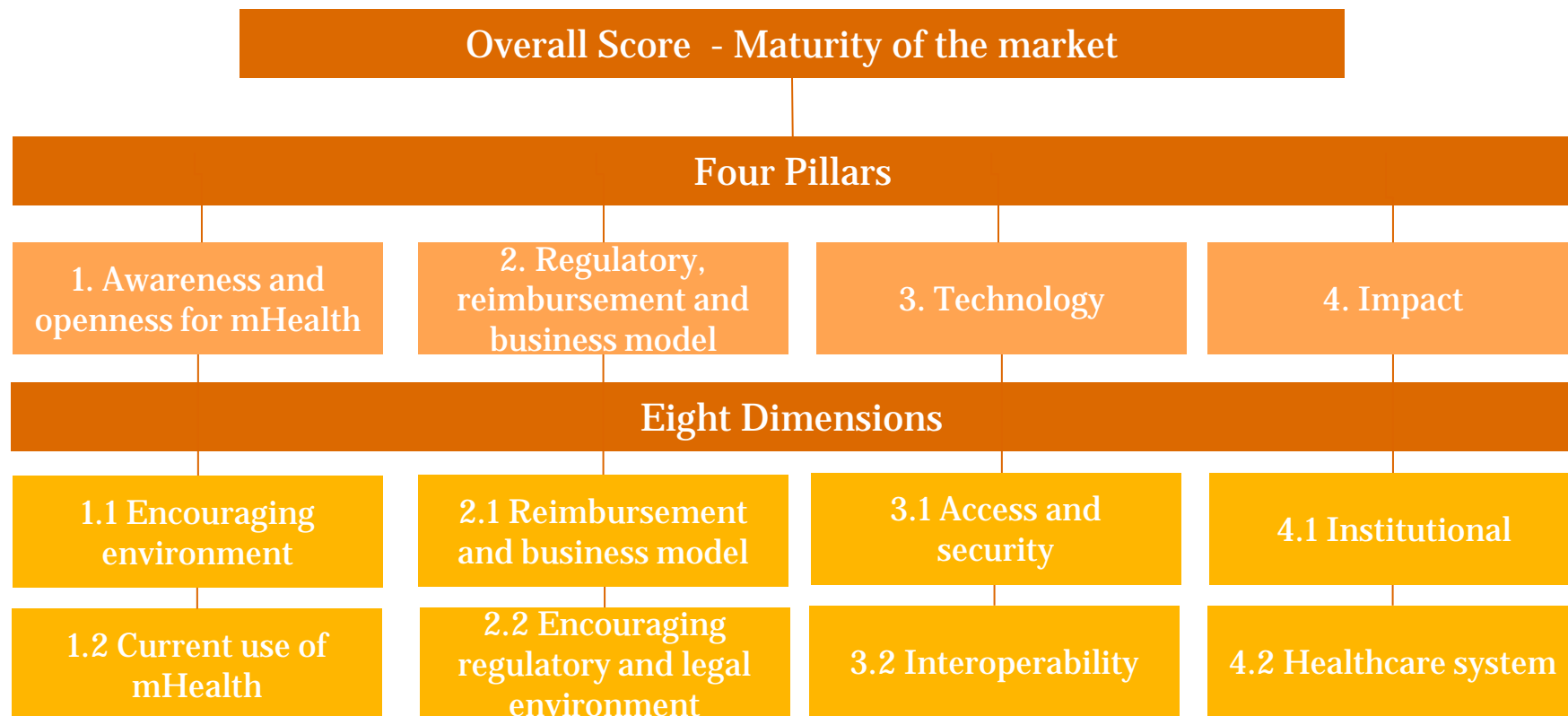


US

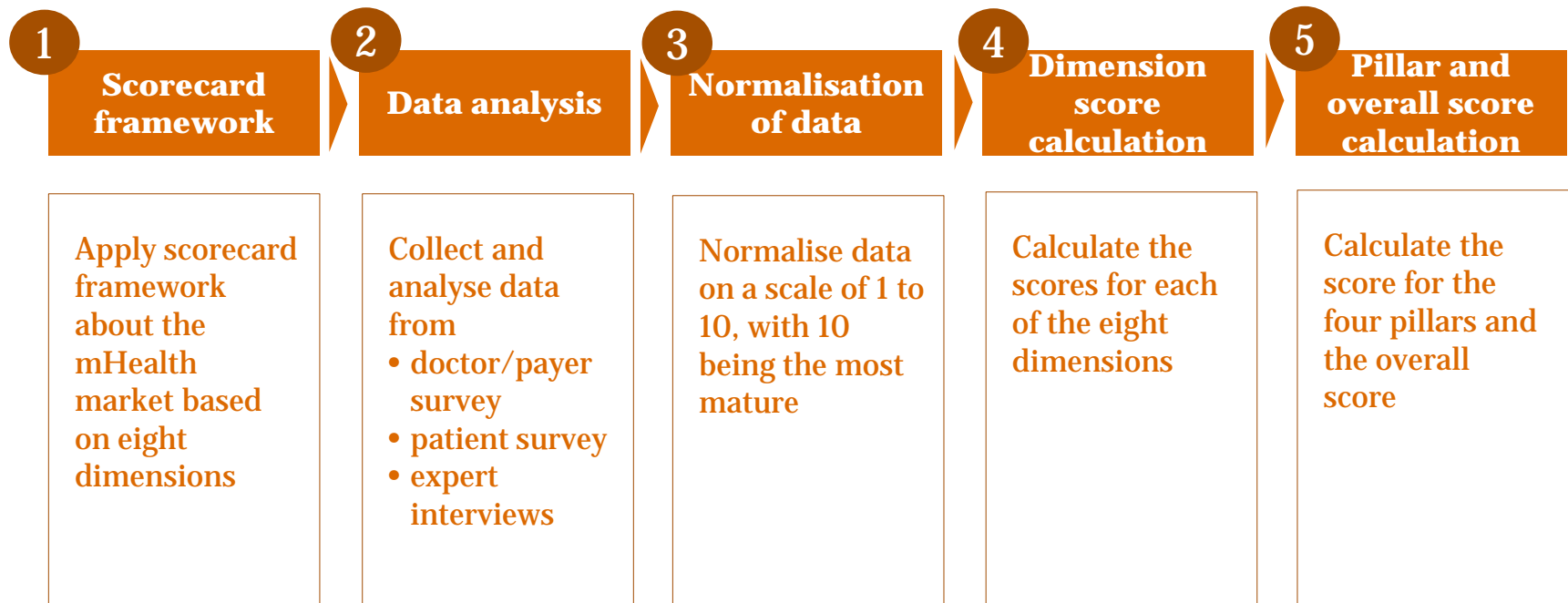
2. mHealth readiness scorecard

mHealth scorecard methodology

- Provides an overview of the countries surveyed and the maturity of their mHealth market through four key pillars. Each pillar is further divided into eight dimensions to support the findings
- Survey questions are grouped into the eight dimensions
- Each country receives a score per pillar and dimension, and an overall score

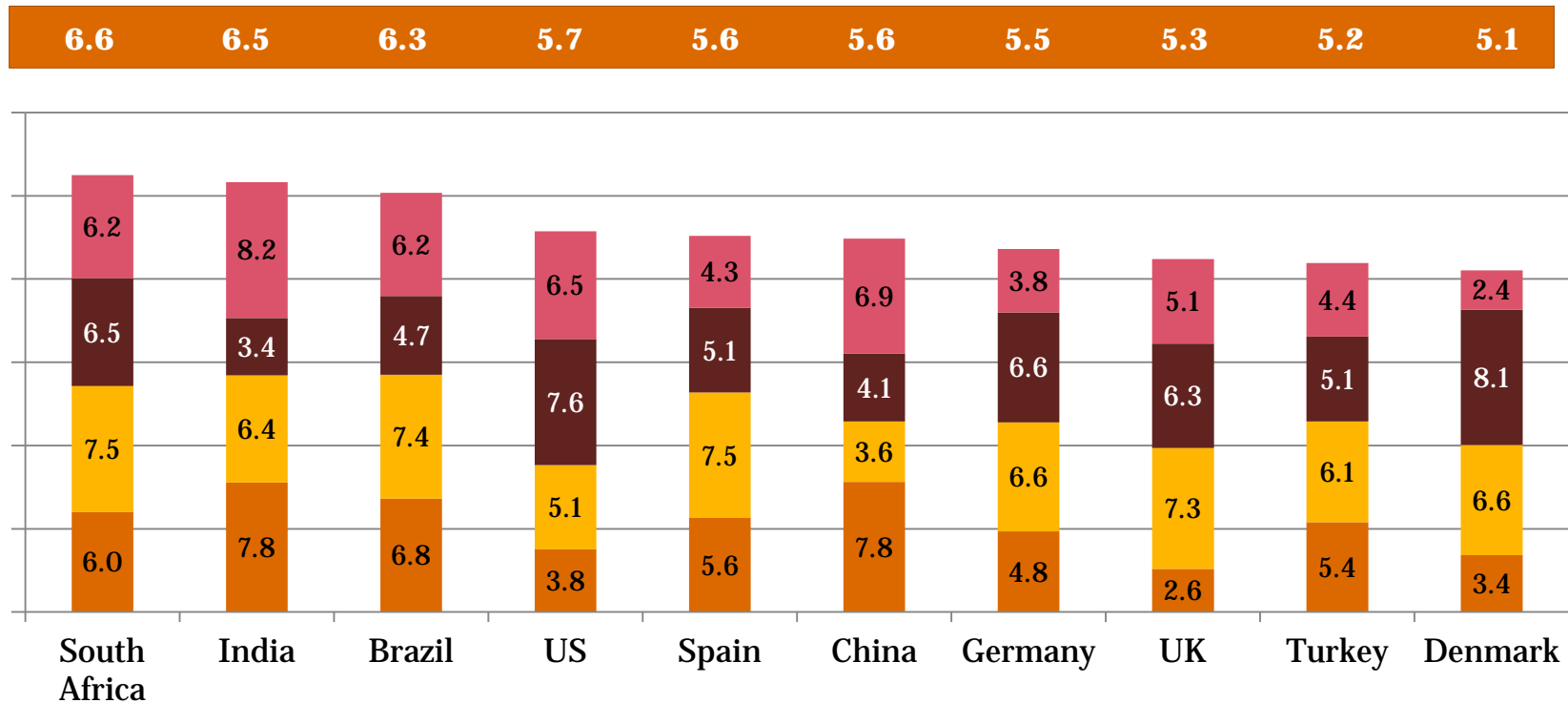


The scorecard is based on the survey of patients, physicians and patients and scores from 10 (mature) to 1 (immature)



Emerging markets lead the way in mHealth, followed by the US as the most mature market

Overall score

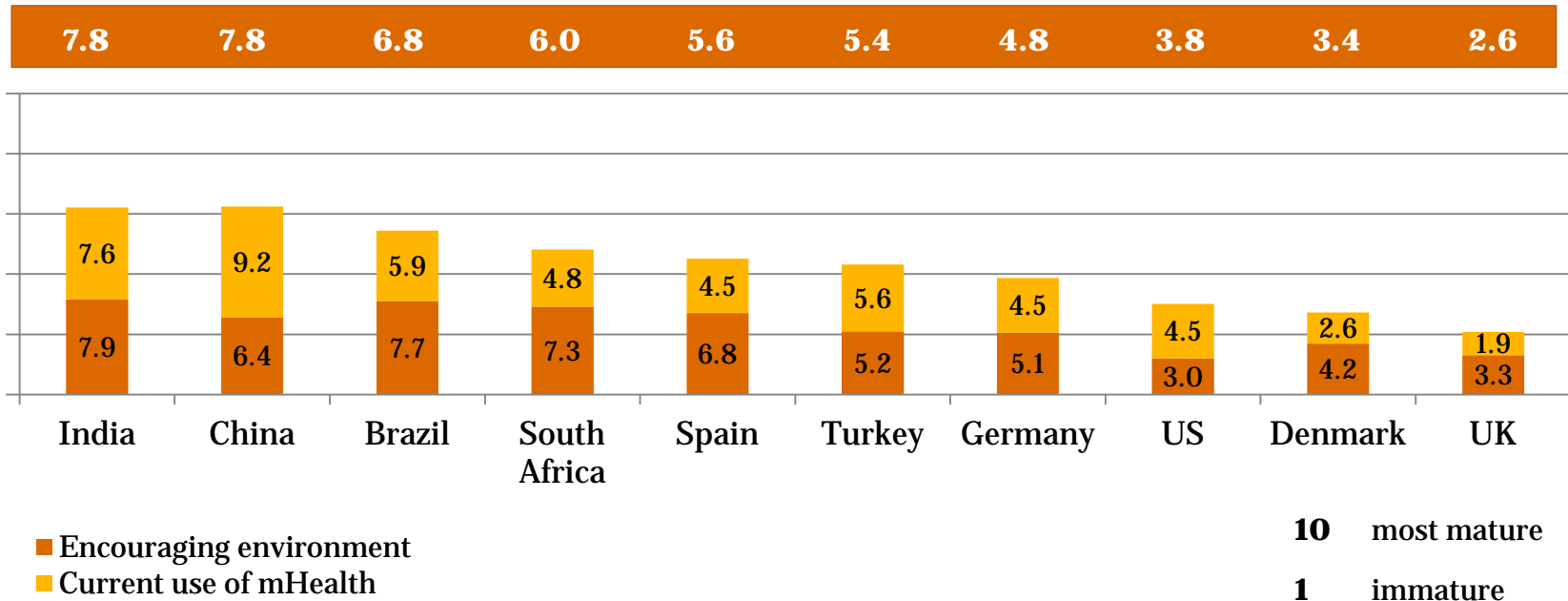


- Awareness and openness for mHealth
- Regulatory environment, reimbursement and business model
- Technology
- Impact

10 most mature
1 immature

First pillar: Awareness and openness for mHealth

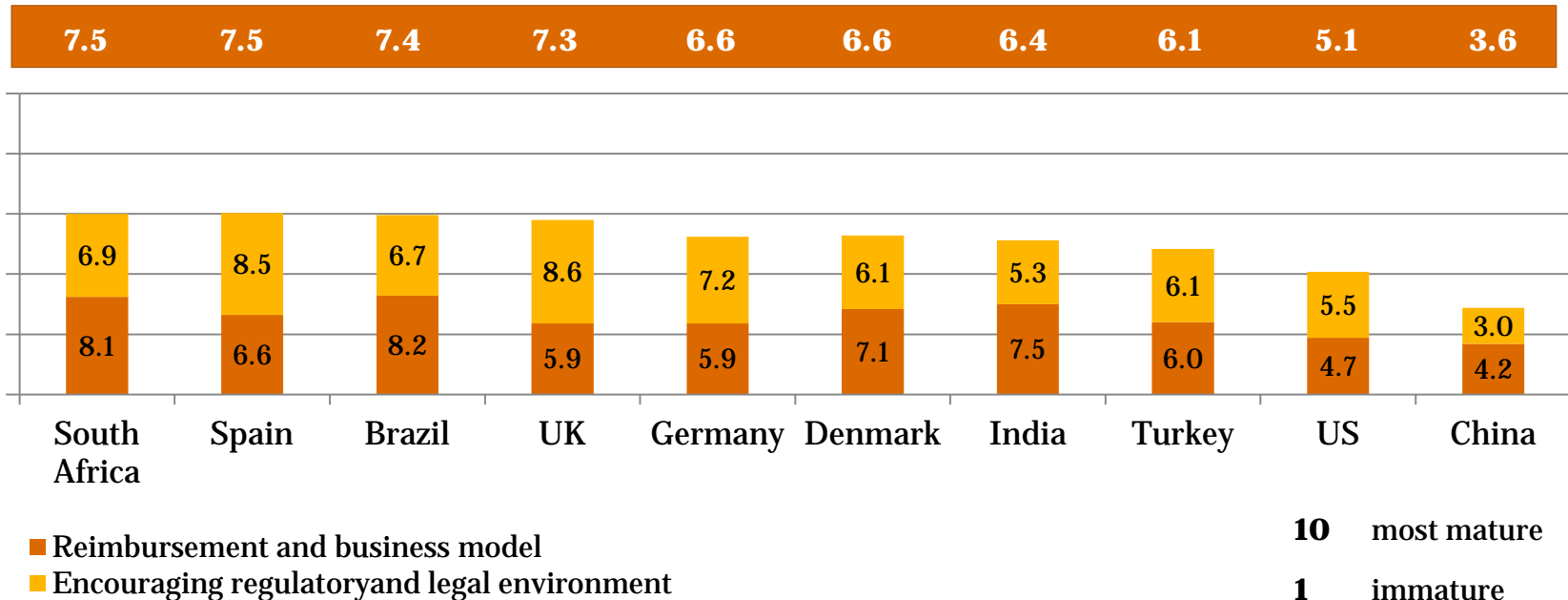
Detailed scores



- The emerging markets score high in doctors encouraging patients to use mHealth as well as patients using mHealth solutions
- The most established mHealth market today, the US, scores very low in awareness and openness of mHealth. The same could be said of the UK. Reasons may be due to physicians who are already using mHealth are more aware of its possible drawbacks

Second pillar: Regulatory environment, reimbursement and business model

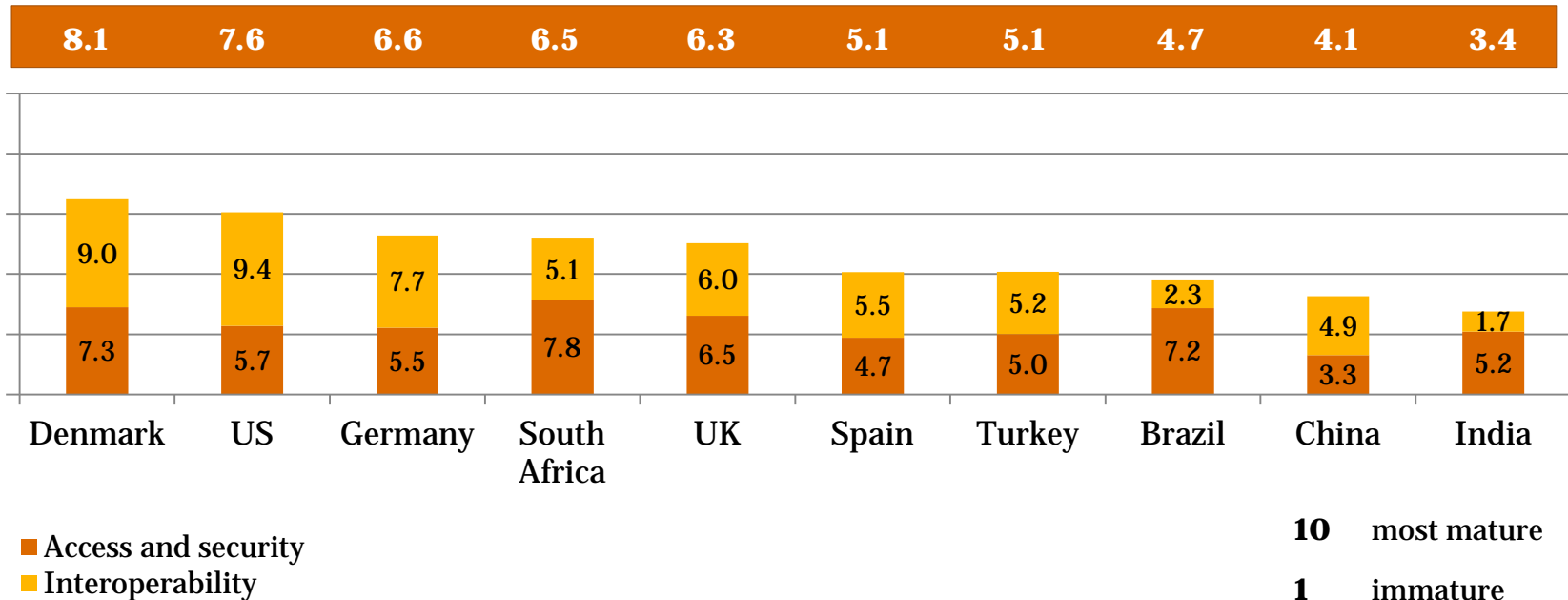
Detailed scores



- Developed and emerging countries have no significant differences on reimbursement, and the regulatory and legal environment
- According to survey respondents, too few proven business models and an unsupportive regulatory environment are key barriers to mHealth
- China's score is the lowest for both dimensions in this pillar, with 83% indicating there are too few proven business models (survey average is 64%)

Third pillar: Technology

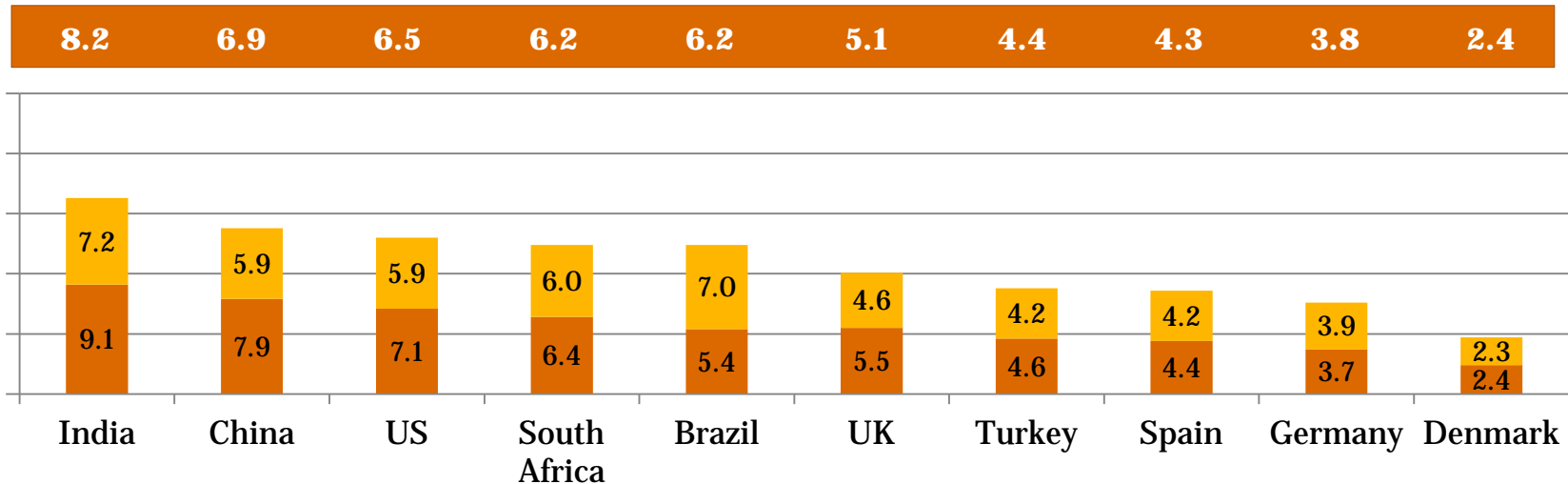
Detailed scores



- In technology, the developed markets e.g., US, Denmark or Germany are ahead
- The higher smartphone penetration, a much higher emphasis on interoperability with existing systems, as well as a more advanced access and security features lead to a perception of high readiness for mHealth from a technological point of view

Fourth pillar: Impact

Detailed scores



■ Impact on institution
■ Impact on Healthcare system

10 most mature

1 immature

- The emerging markets and the US score high in this pillar
- The impact on institutions is measured by the expected impact on medical care, on the relationships with patients and on internal operations. For example, 92% of physicians in India expected a noticeable effect of mHealth in 3 years. In Denmark, only 80% believe this is the case
- The impact on healthcare can be illustrated by the following figure: 52% of physicians in India believe the widespread adoption of mHealth is inevitable, vs. 34% in Denmark

3. Top ten findings of the survey

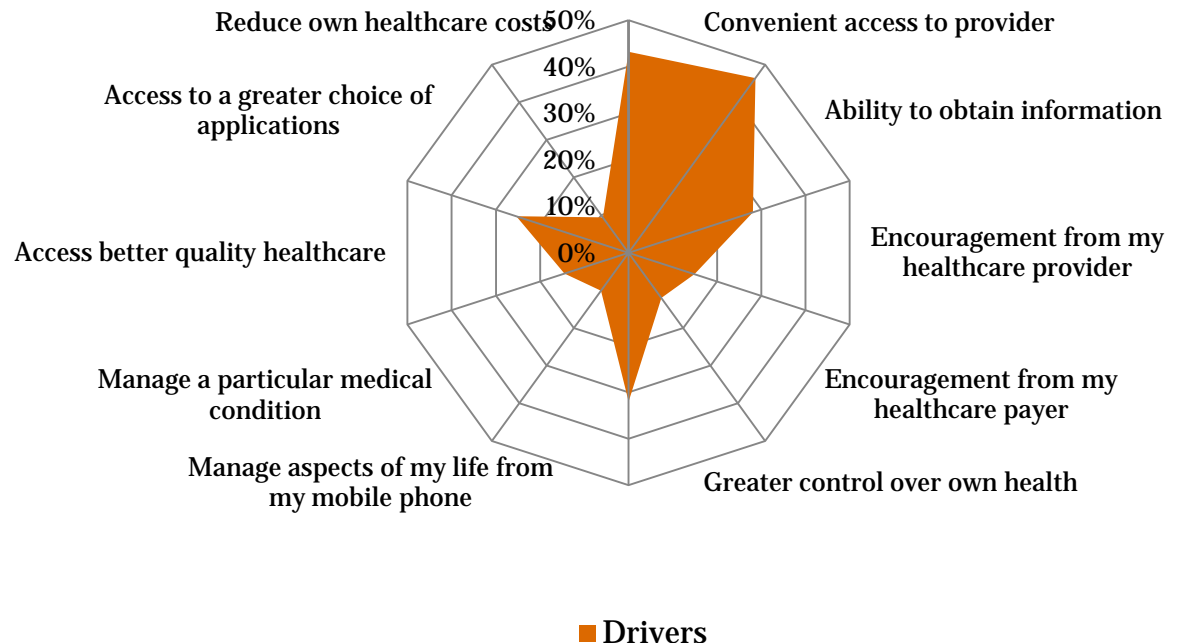
Finding #1 – mHealth could enable a disruptive move from doctor-directed care towards a more personalised, consumer- oriented model

46%

of surveyed patients expect more convenient access to healthcare providers through mHealth

Patients believe that mHealth offers them convenient access to providers as well as the possibility to reduce their own healthcare costs

Driver for patients



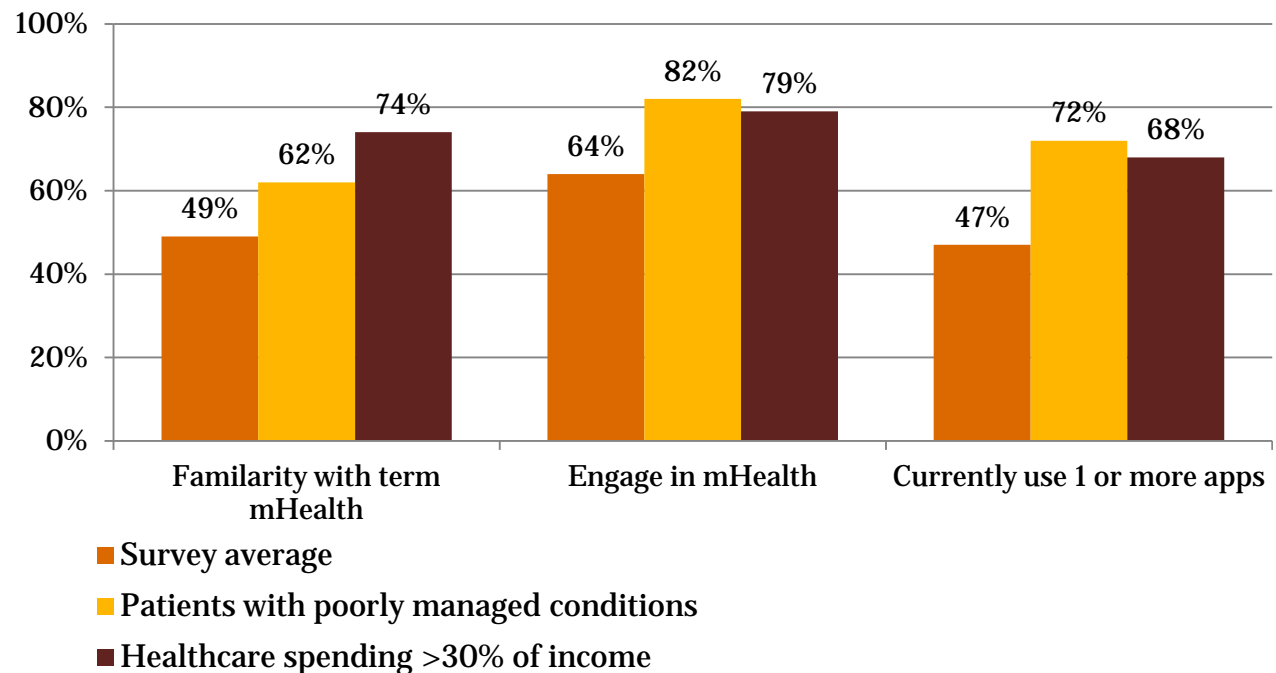
Finding #2 – Patients with health issues are most likely to use mHealth products and services

82%

of patients with poorly managed conditions engage in some sort of mHealth (vs. 64% survey average)

Patients with chronic diseases like diabetes are better informed about mHealth, more likely to be using mHealth services and more likely to pay for them

mHealth adoption for patients with chronic diseases vs. survey average



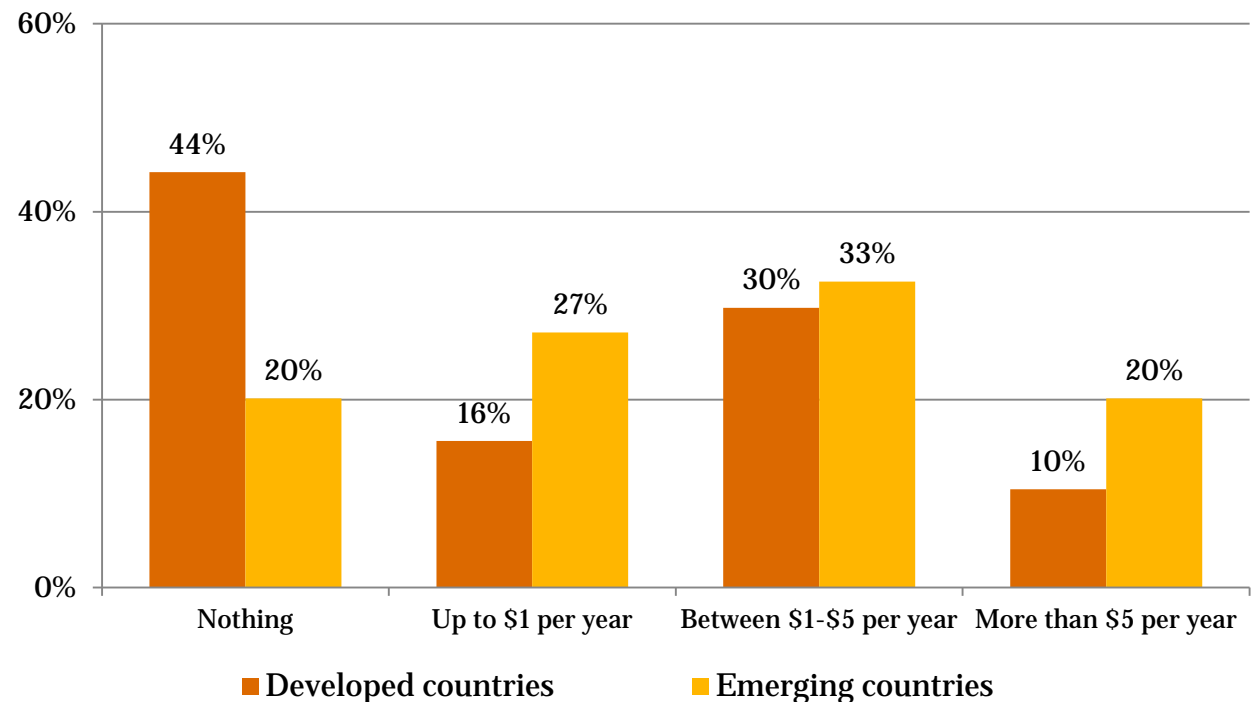
Finding #3 – Patients are highly price sensitive, mainly because they think healthcare payers should bear the costs

20%

of patients in emerging countries would pay more than \$5 annually for an mHealth service, vs. 10% in developed countries

Patients in emerging markets are willing to pay more than those in developed ones – likely reflecting the higher proportion of all healthcare costs they have to pay themselves

Patients willingness to pay



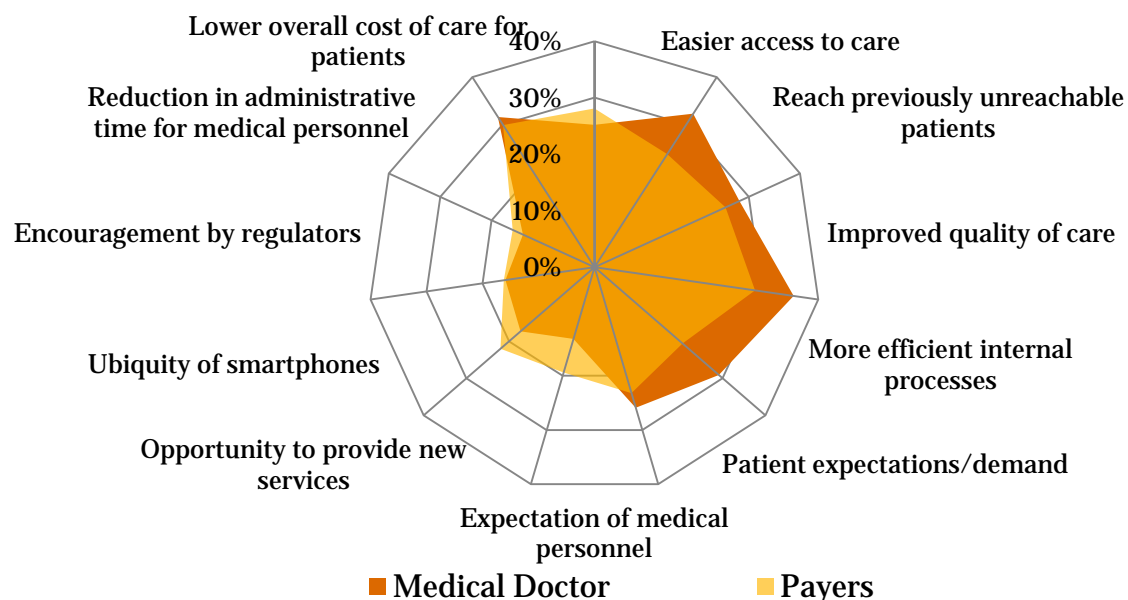
Finding #4 – Payers and – to a lower extent physicians – see the potential for improving quality of care and reduced costs...

40%

of payers encourage patients to monitor their condition through mHealth (vs. 25% of physicians)

Payers seem more optimistic about the potential for mHealth in promoting better health through greater patient involvement in care and reduced healthcare costs

Drivers for physicians and Payers



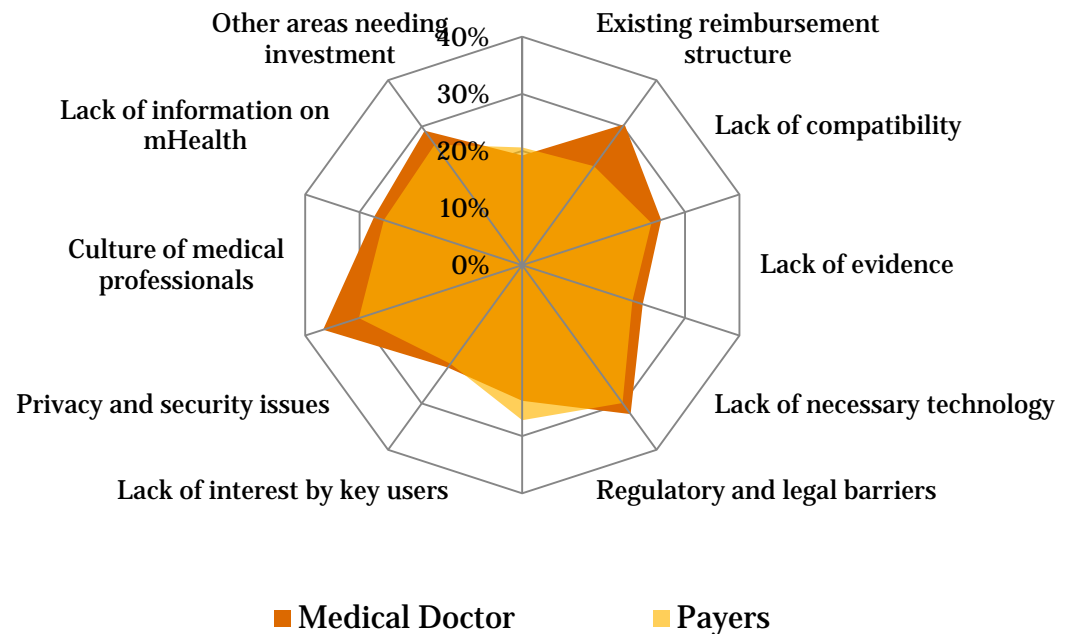
Finding #4 – ... but physicians are concerned that mHealth will make patients too independent

44%

of physicians are worried that mHealth will make patients too independent

Patients are aware of this reluctance among physicians. 60% of active users of mHealth say that patients and technology companies are more interested in mHealth than physicians

Barriers for physicians and payers

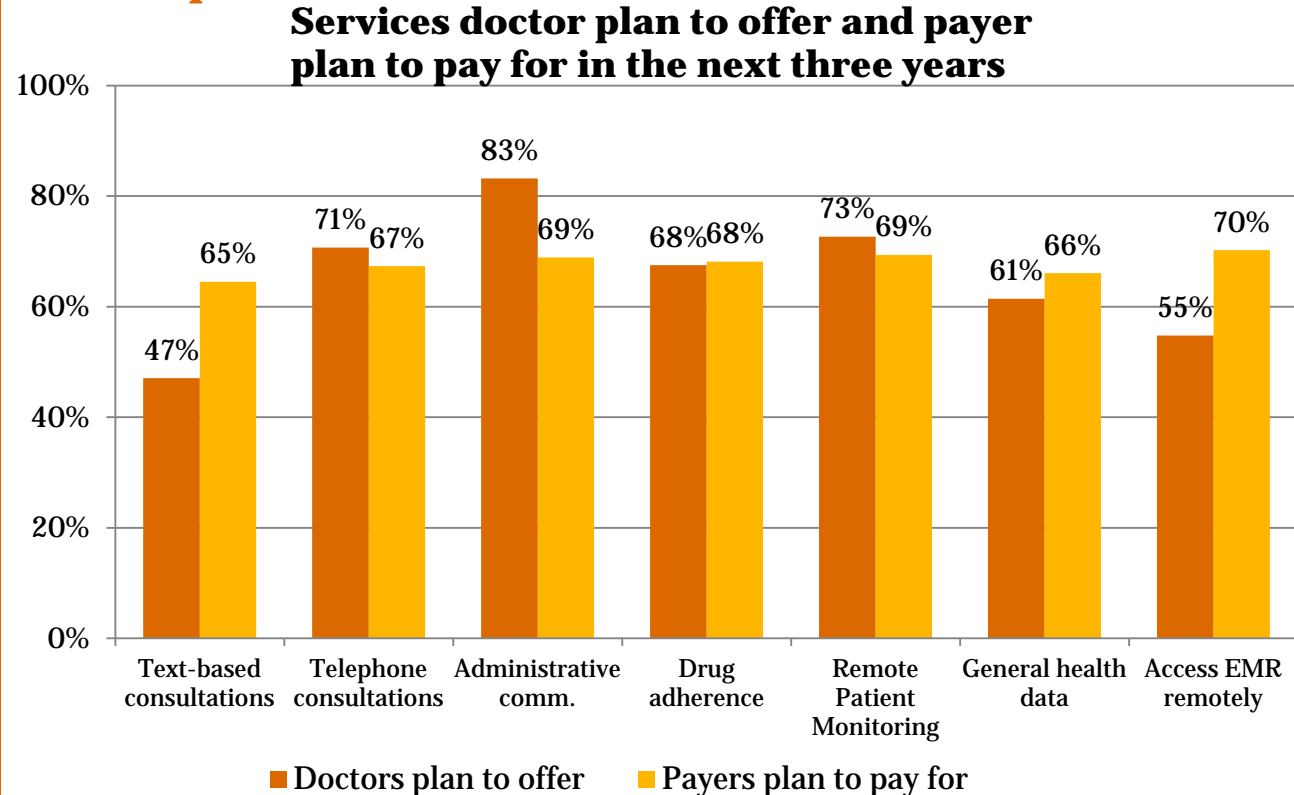


Finding #5 – Payers are more likely to cover mHealth services than physicians are to provide them

70%

of payers plan to pay for mobile access to EMR in the next three years, but only 55% of physicians plan to offer this service

Physicians frequently cite existing payment structures as a barrier to their greater deployment of mHealth yet reimbursement seems to be less an issue among payers than expected



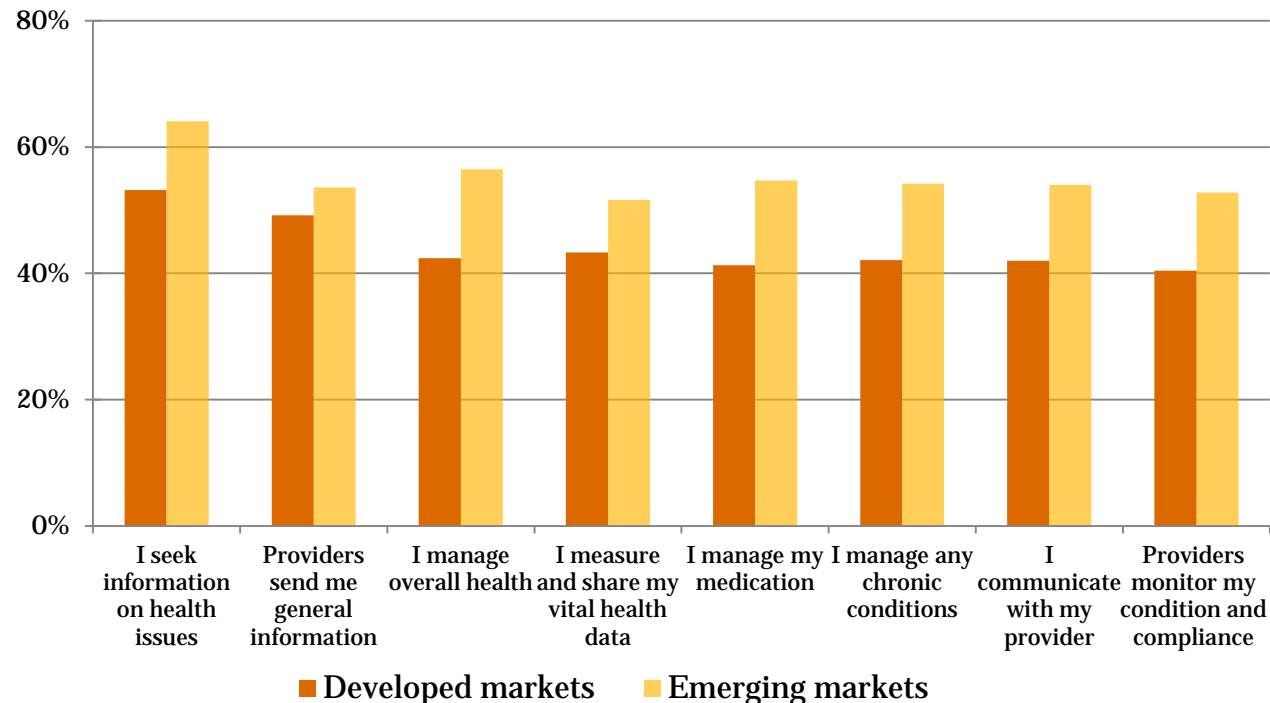
Finding #6 – Emerging markets will lead the way in mHealth

61%

of surveyed patients in emerging markets are aware of term “mobile health” (vs. 37% in developed markets)

mHealth is less disruptive to healthcare in emerging markets because for a majority, it is not a substitution to care but rather the only access

High patient expectations in emerging countries: mHealth will change how...



Source: PwC analysis based on EIU research, 2012

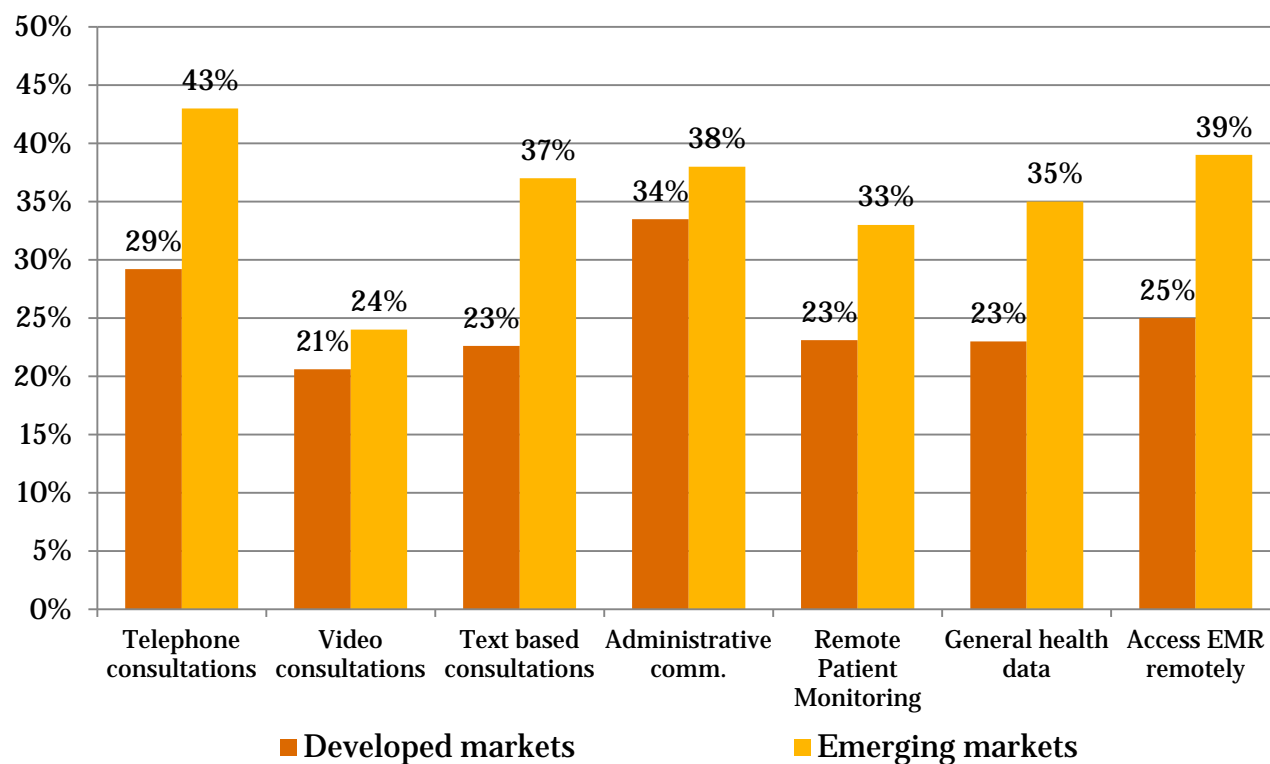
Finding #6 – Emerging markets will lead the way in mHealth

43%

of payers in emerging markets pay or plan to pay for telephone consultations (vs. 29% in developed markets)

More mHealth services are covered by payers in emerging markets than in developed countries

Services payers have already begun to pay for



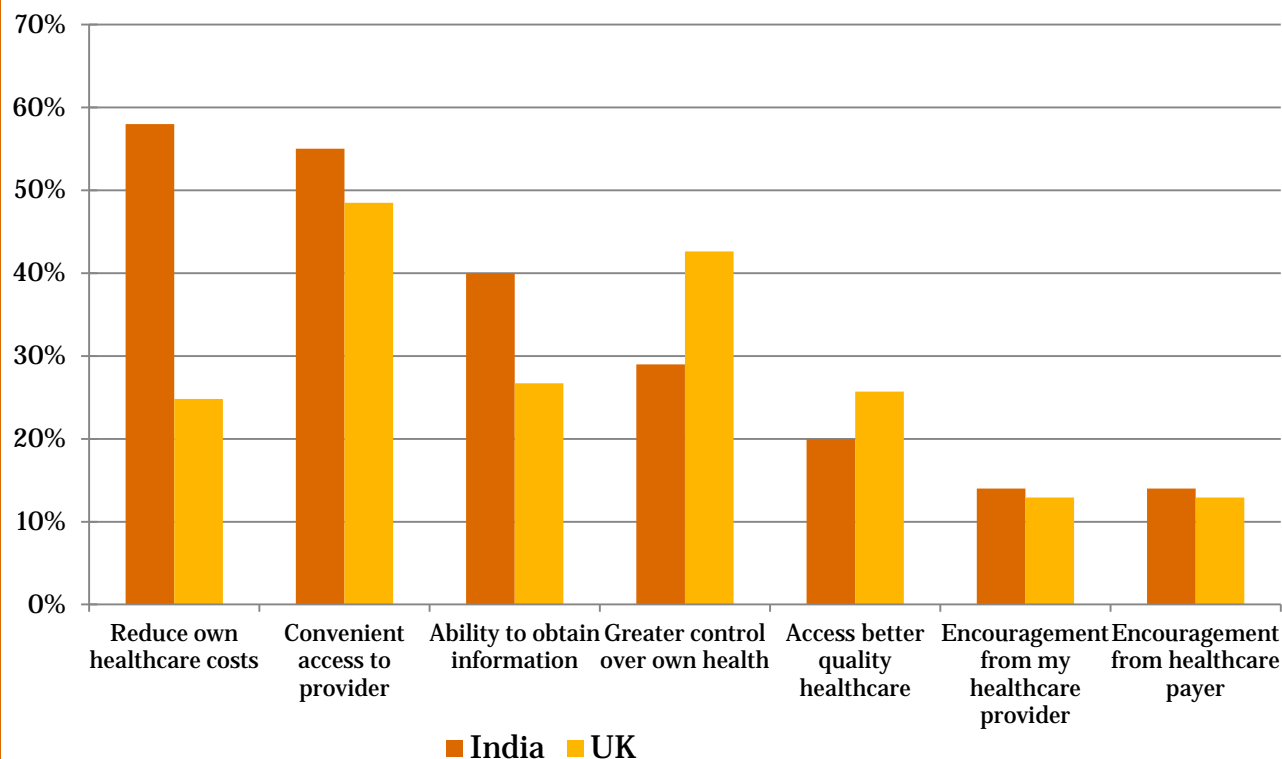
Finding #7 – A tale of two countries – India and the UK

0.6

*physicians per
1,000
inhabitants are
practicing in
India (vs. 2.2
per 1,000 in the
UK)*

**For India, mHealth address pressing healthcare needs;
for the UK, it is an added luxury**

Drivers for patients



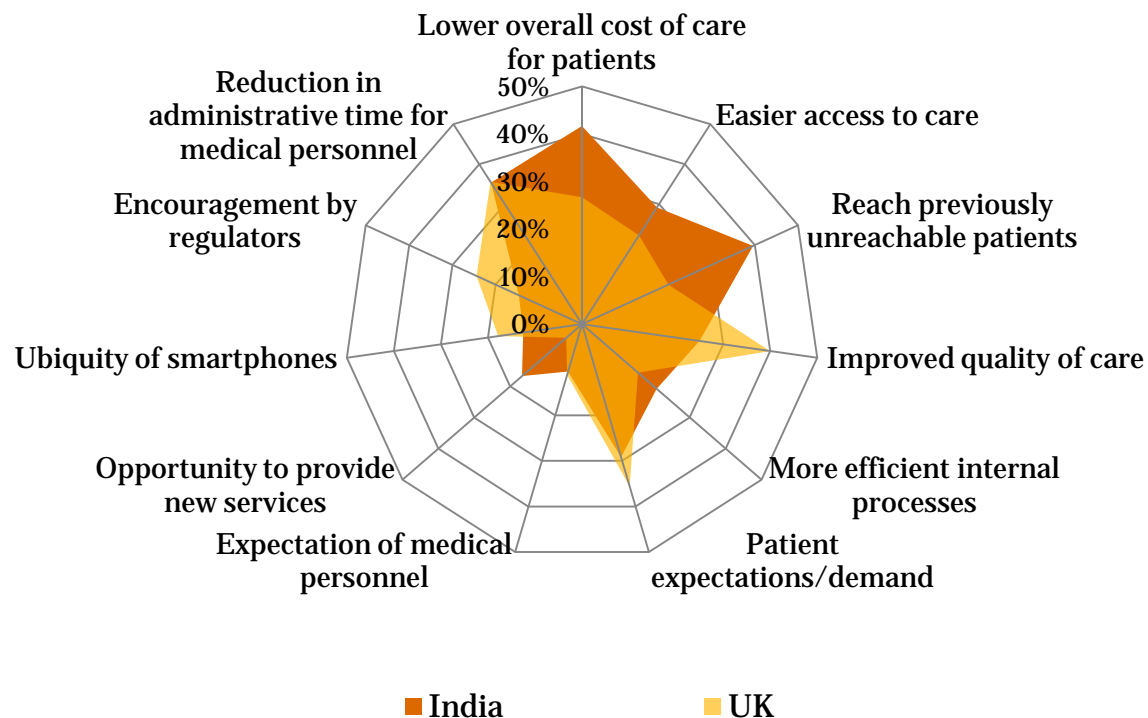
Finding #7 – A tale of two countries – India and the UK

88%

of India respondents do engage in mHealth activity (vs. just 52% of UK respondents)

Lower cost for patients is the leading driver of mHealth in India, whereas the reduction of administrative time is a leading concern of physicians in the UK with the NHS system.

Drivers for physicians and payers



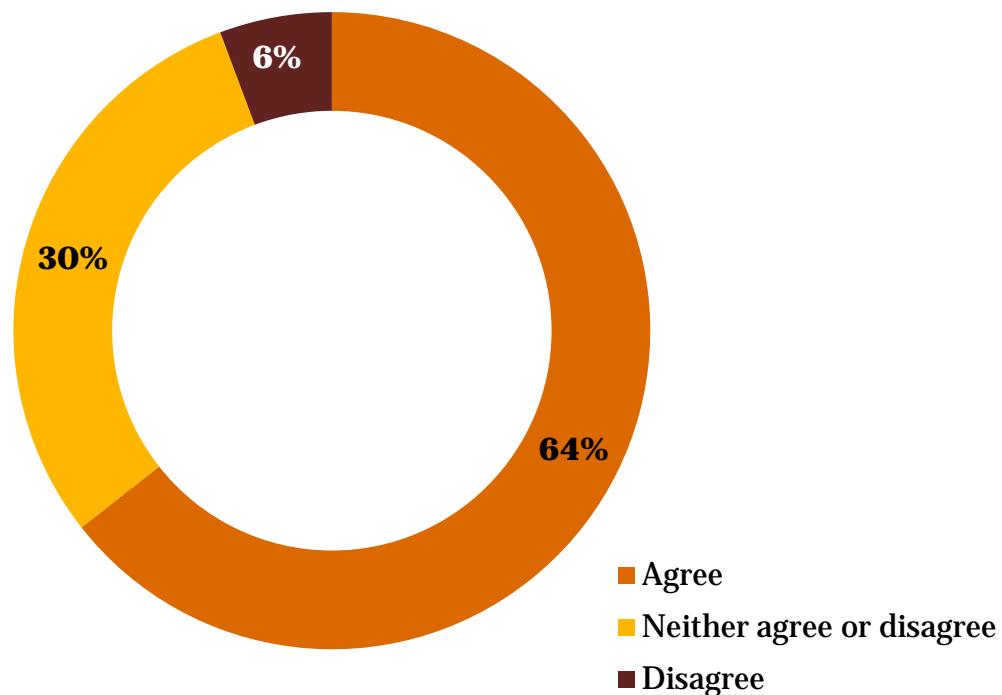
Finding #8 – Focus on solutions, not technology

64%

of physicians and payers say mHealth has exciting possibilities but too few proven business models

To create real value and identify business models, companies must focus on solutions that address the needs of stakeholders (payer, provider, patients) directly

Exciting possibilities, but too few business models



Finding #8 – Focus on solutions, not technology

48%

of surveyed patients who have used an mHealth app discontinued it after the first six months

Immense high dropout rates illustrates the need for engaging, integrated, interoperable, and intelligent apps

Example for PwC Six Success principles: WellDoc Diabetes manager

Integrated

- Integrated into existing healthcare plans, personal lifestyles, and clinical process
- Utilizes multiple technologies

Interoperability

- Incorporated into Allscripts electronic health record system
- Enables data from app to be accessed by physicians through EHR

Intelligent

- App provides real time alerts and intelligent guidance for users based on data inputted
- Doctors receive clear, actionable data that they can use as a basis for recommendations



Socialized

- Improves treatment and medication while providing personal coaching, direct physician support, and caregiver linkage

Outcome Oriented

- Demonstrated clinical success in trials
- Demonstrated economic success in the reduction of health care costs

Engaging

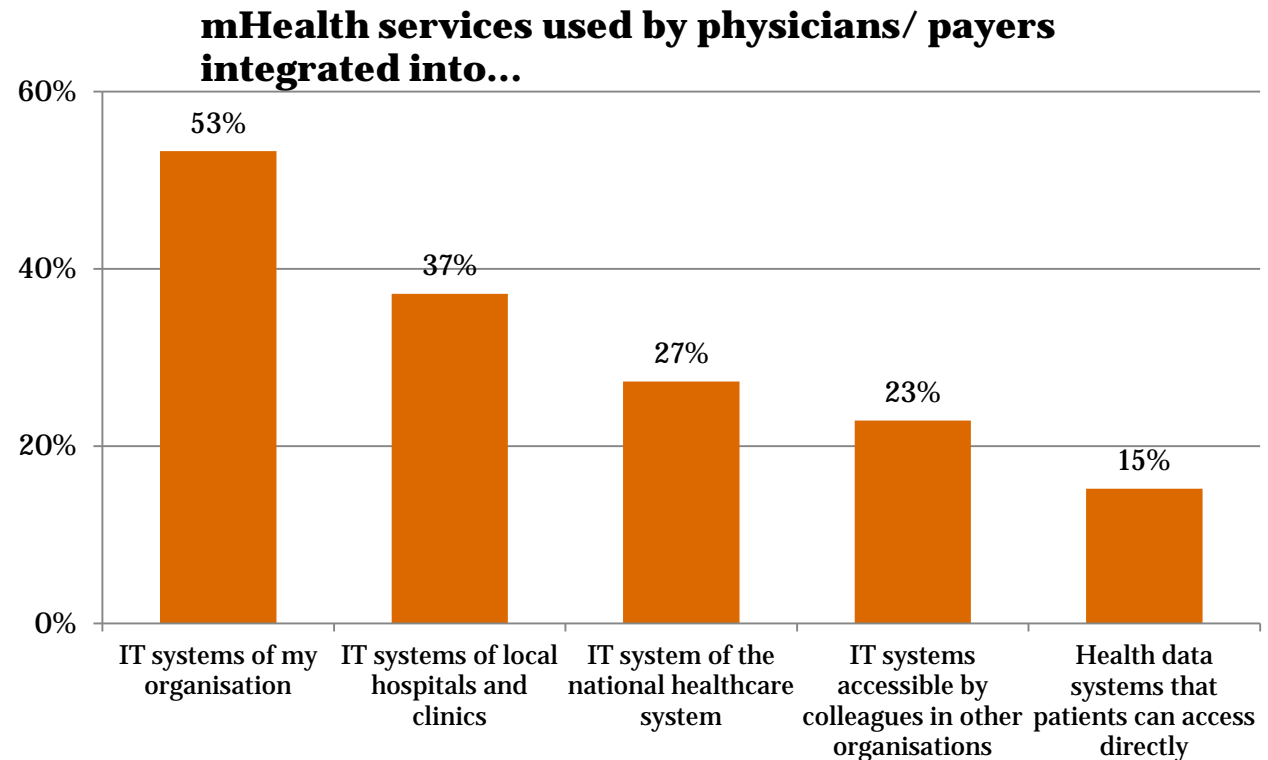
- Patients can configure settings, messaging, tonality, and interaction modes

Finding #9 – Technology still presents challenges for mHealth adopters

47%

of surveyed physicians say that mHealth applications they use will not work with their organisation's IT

Lack of interoperability, standards and integration into existing IT-systems impedes uptake of the fragmented mHealth market



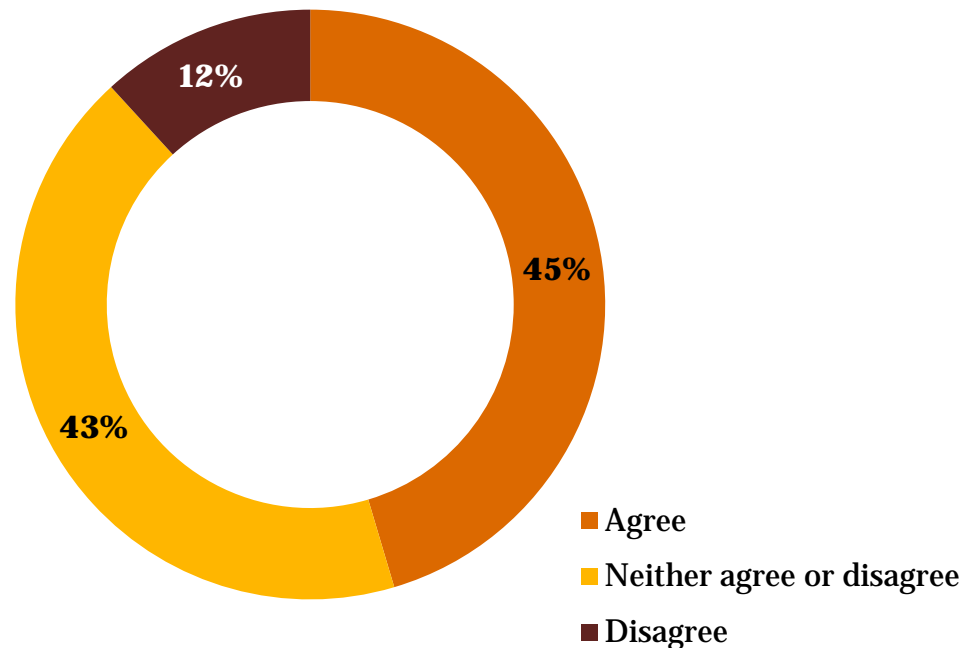
Finding #10 – Regulators could encourage advances in mHealth, but the survey shows otherwise

45%

of physicians and payers think mHealth advances are held up by regulation

Surveyed physicians and payers see little encouragement for mHealth by regulators, due to regulatory and legal barriers

mHealth advances are being held up by regulation created for older technologies that does not translate well to newer ones

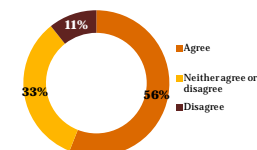


4. Country breakdown

Overview of key data

1

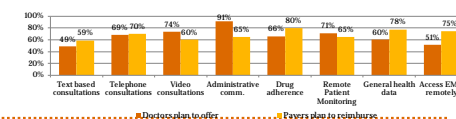
Expectation of physicians and healthcare payers about the widespread adoption of mHealth



2

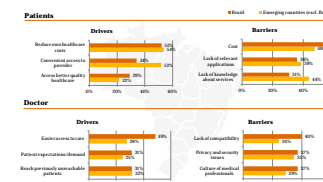
Services physicians would like to offer and payers plan to reimburse for in the next 3 years

Services physicians would like to offer and payers plan to reimburse for in the next 3 years



3

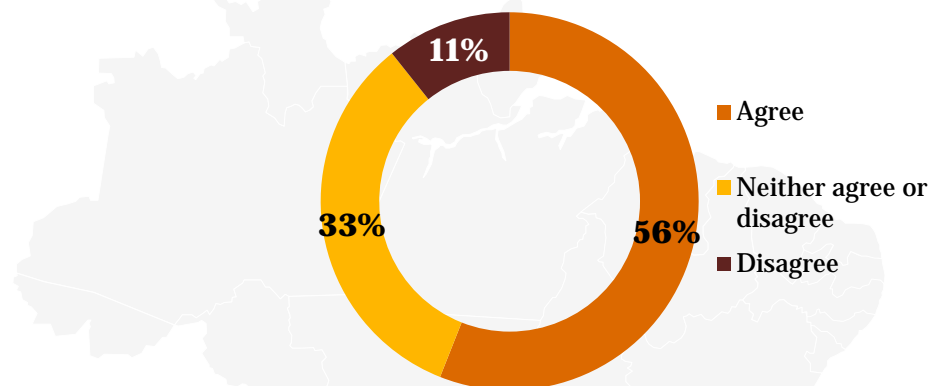
Top 3 drivers and barriers for patients and physicians (including average of the peer group)



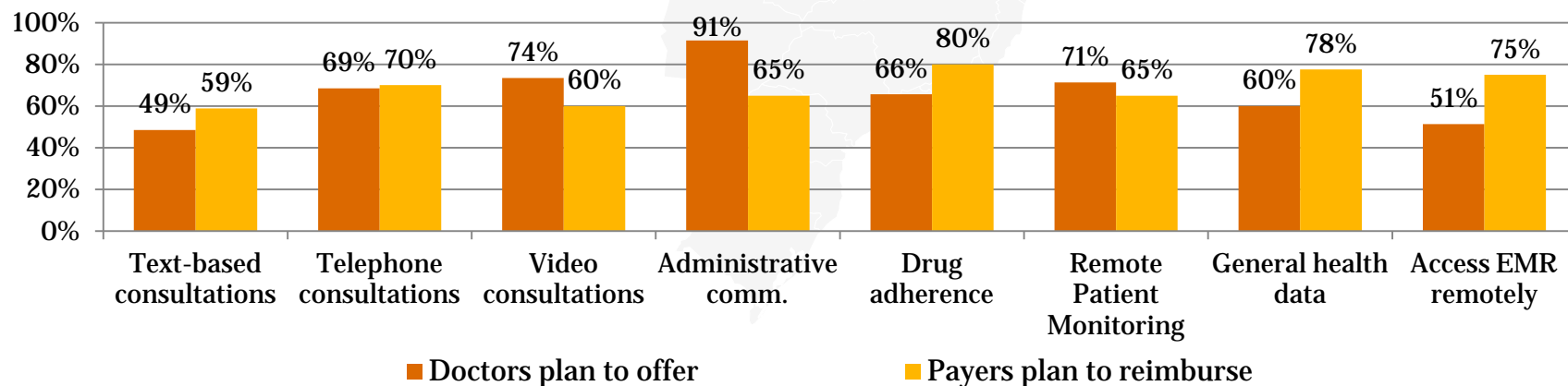
Brazil - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years

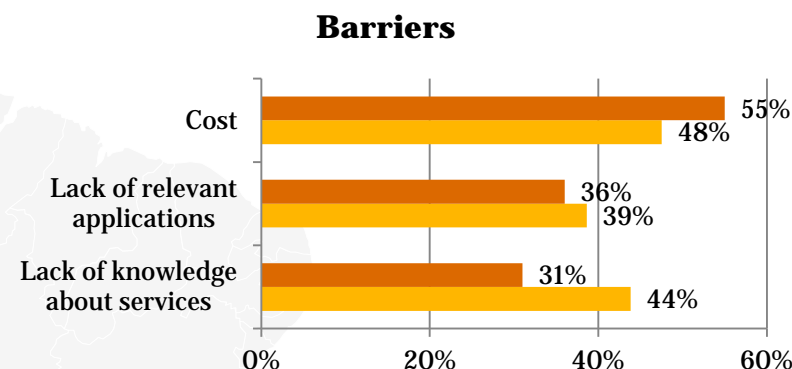
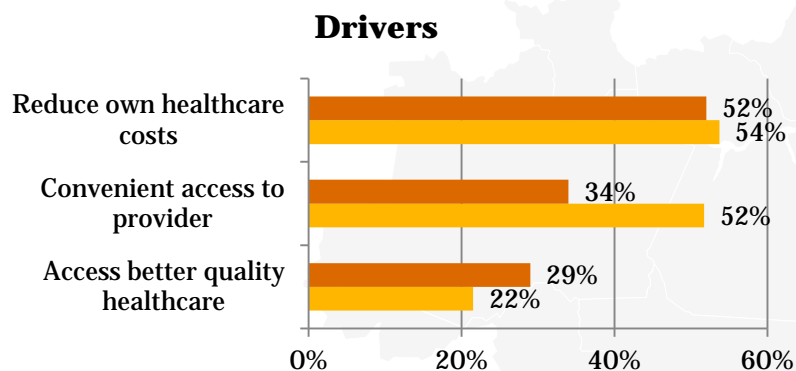


Brazil - Top 3 drivers and barriers for patients and physicians

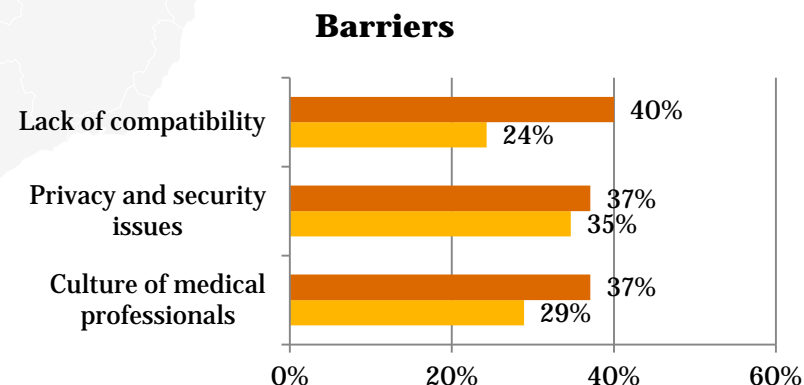
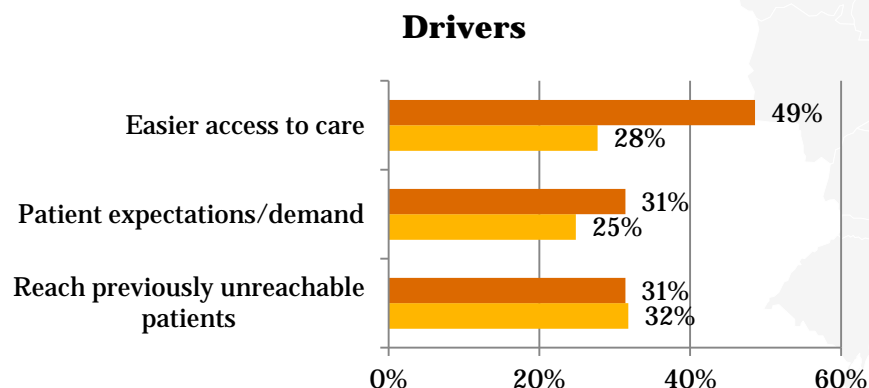


Patients

■ Brazil ■ Emerging countries (excl. Brazil)



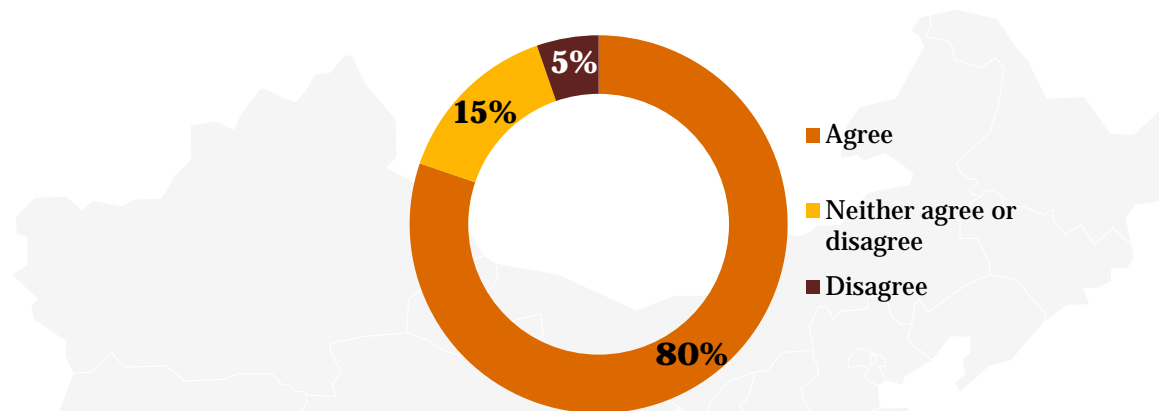
Physicians



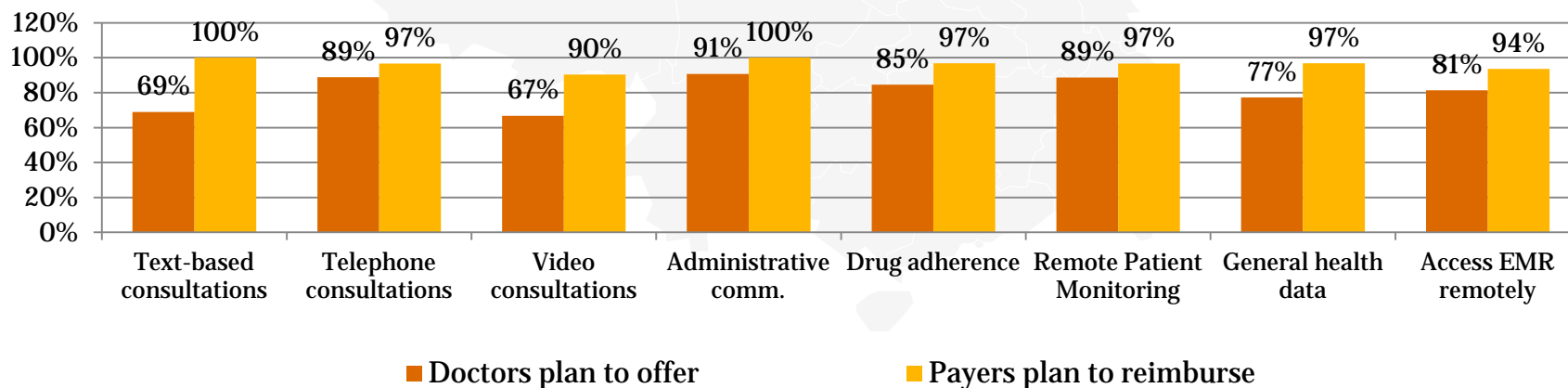
China - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



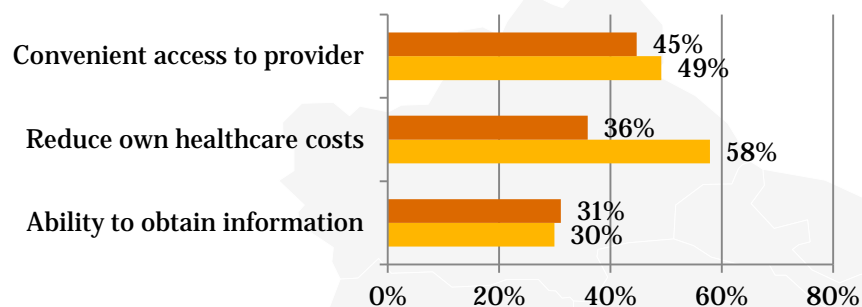
China - Top 3 drivers and barriers for patients and physicians



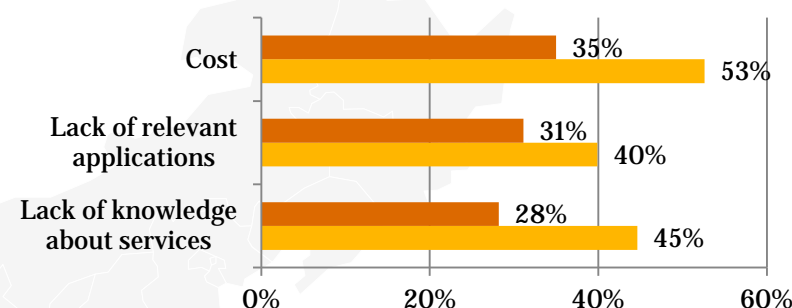
Patients

■ China ■ Emerging countries (excl. China)

Drivers

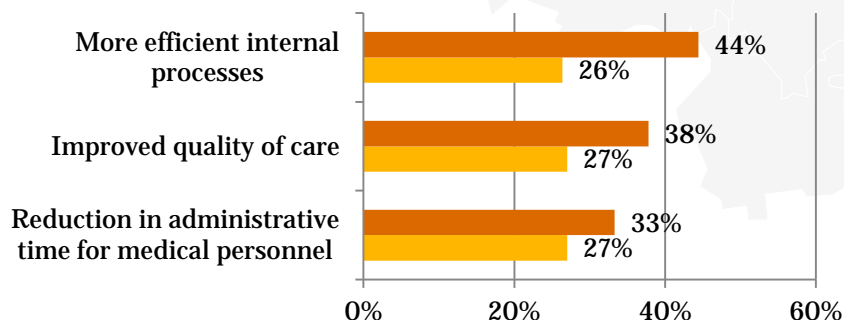


Barriers

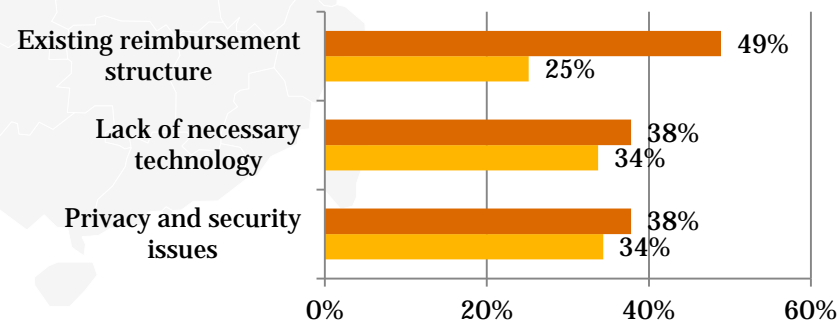


Physicians

Drivers



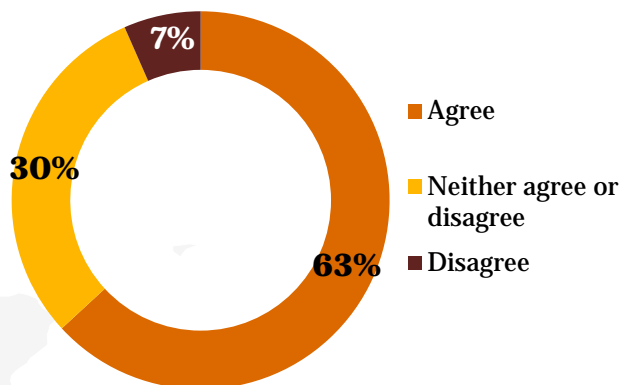
Barriers



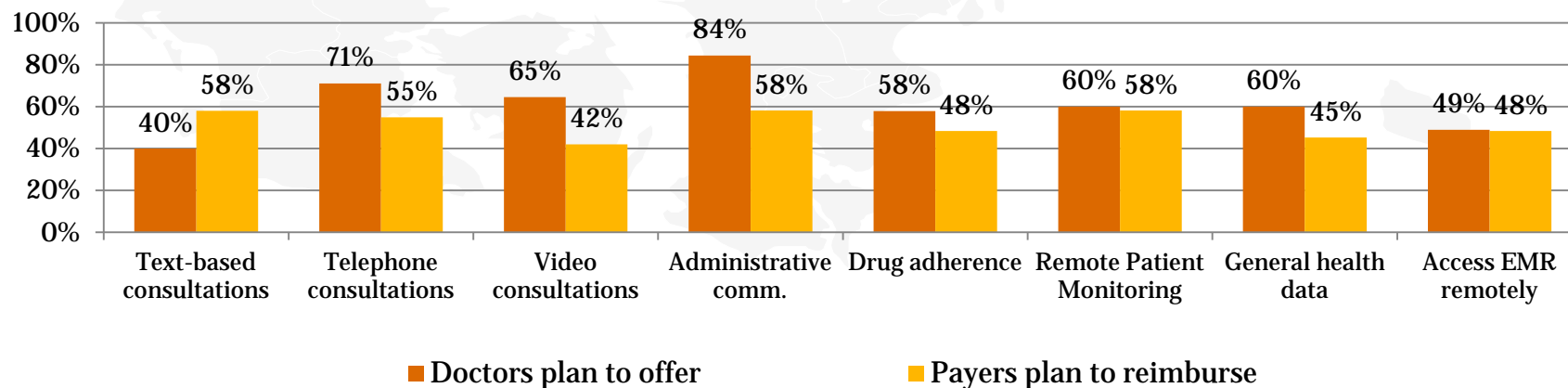
Denmark - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



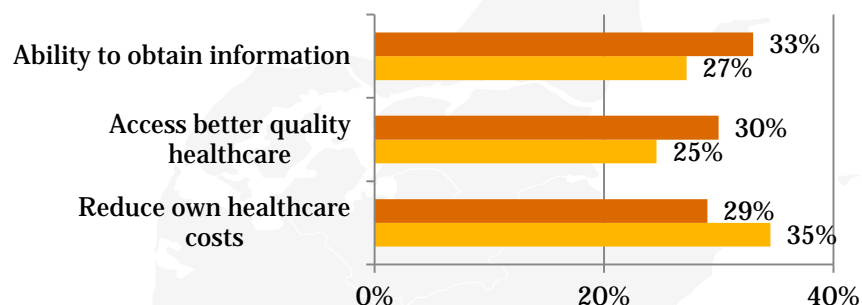
Denmark - Top 3 drivers and barriers for patients and physicians



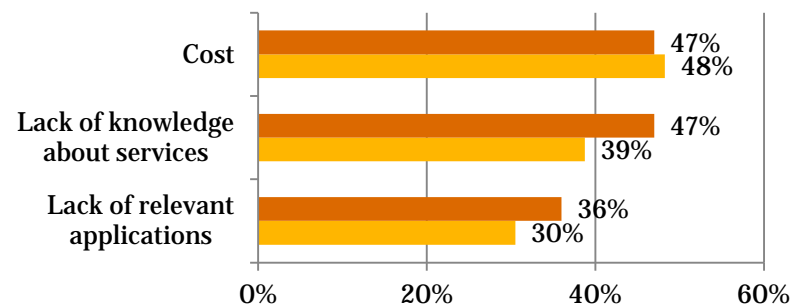
Patients

■ Denmark ■ Developed countries (excl. Denmark)

Drivers

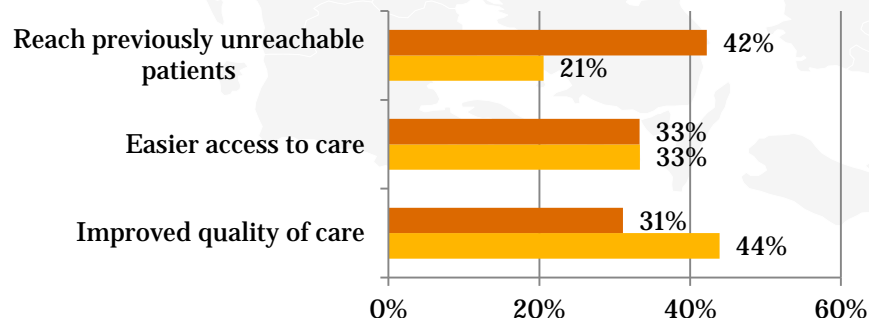


Barriers

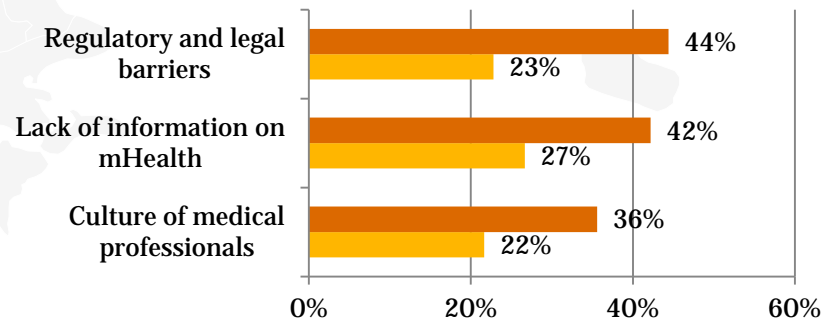


Physicians

Drivers



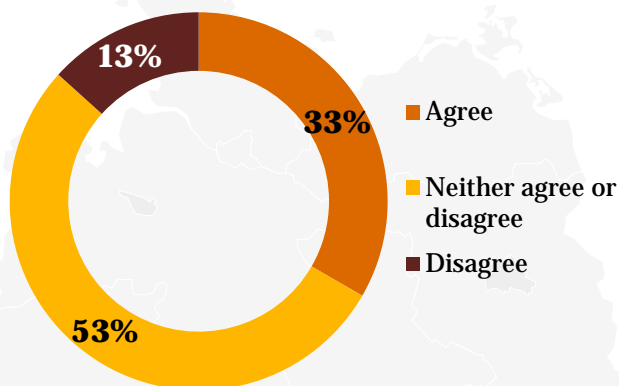
Barriers



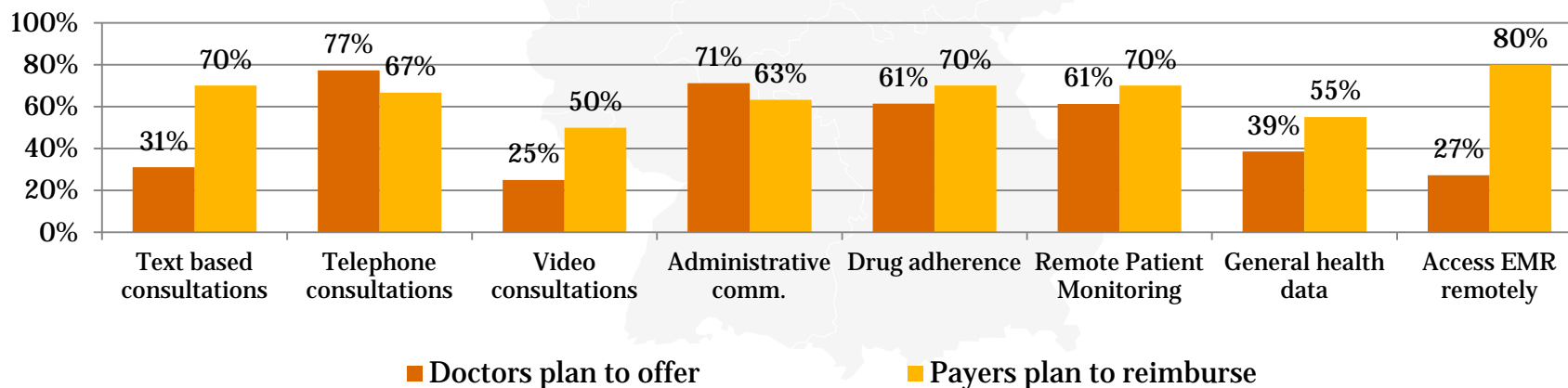
Germany - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



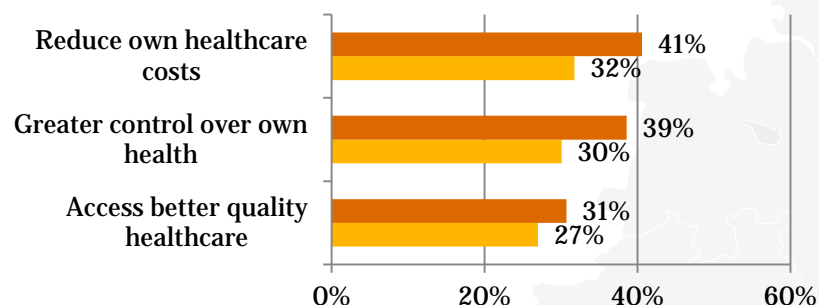
Germany - Top 3 drivers and barriers for patients and physicians



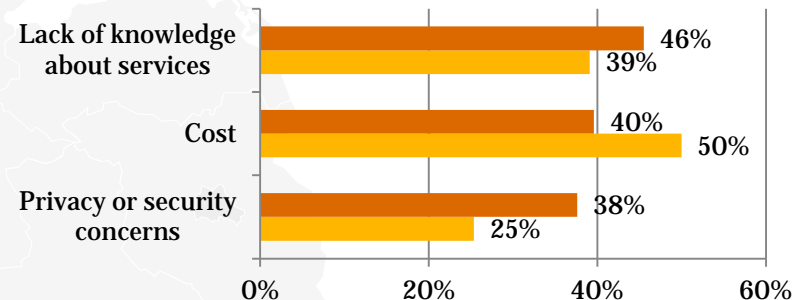
Patients

Germany Developed countries (excl. Germany)

Drivers

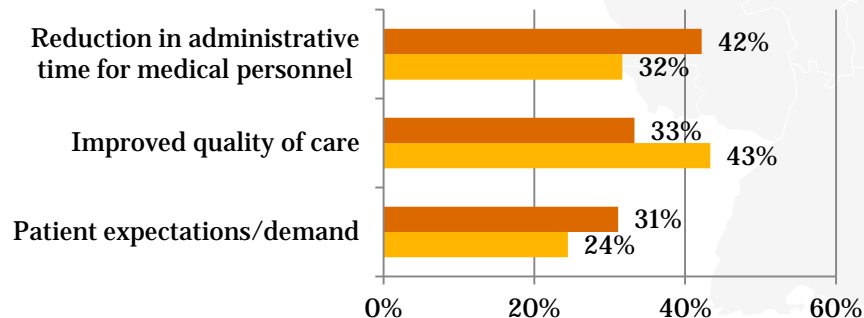


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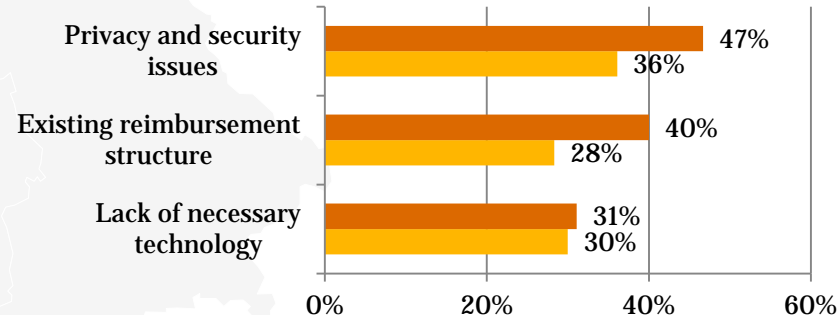


Physicians

Drivers



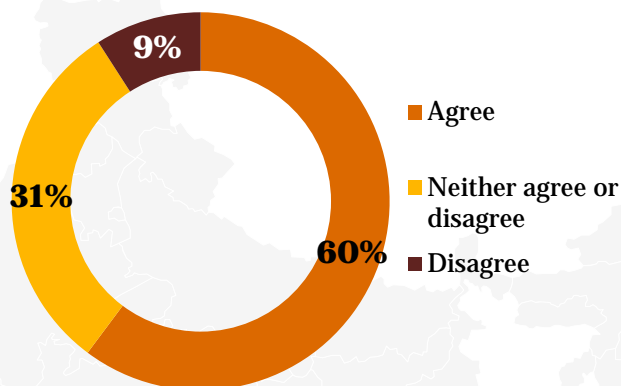
Barriers



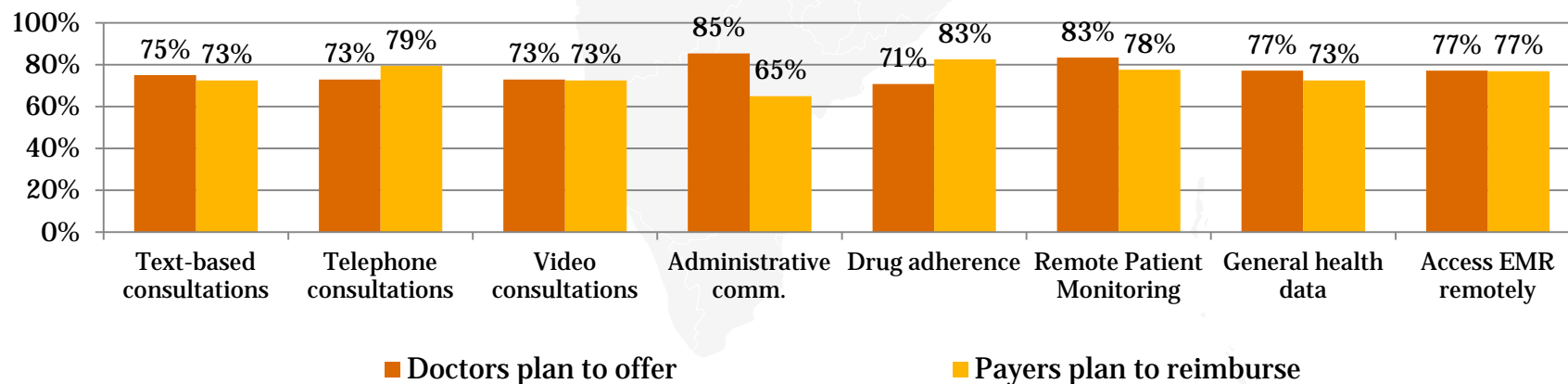
India - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



India - Top 3 drivers and barriers for patients and physicians

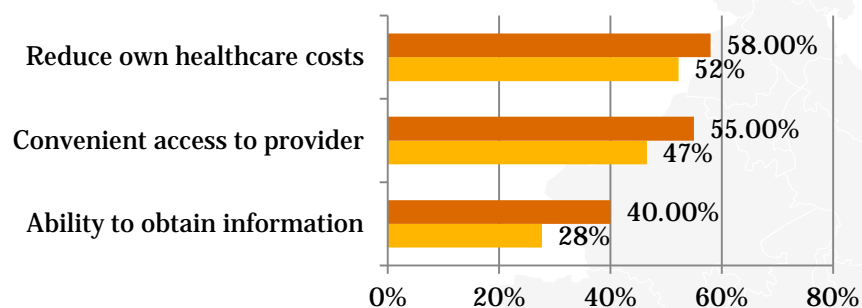


Patients

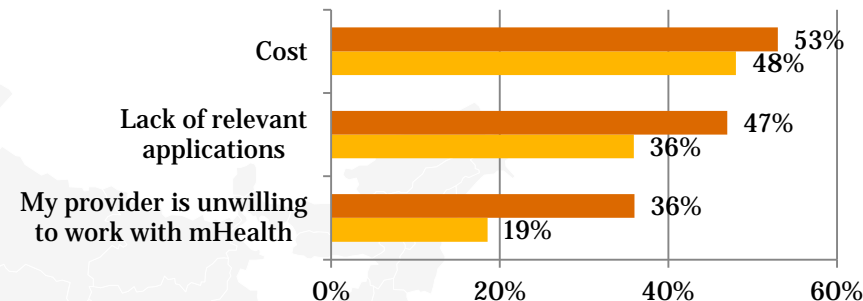
India

Emerging countries (excl. India)

Drivers

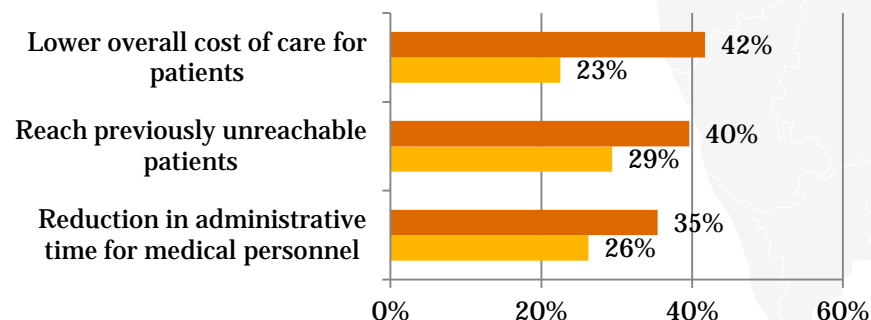


Barriers

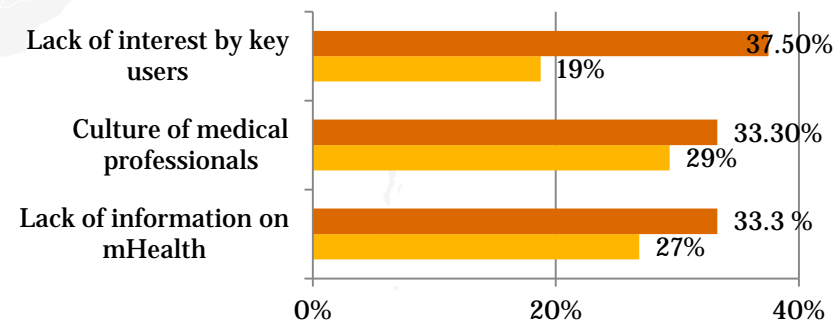


Physicians

Drivers



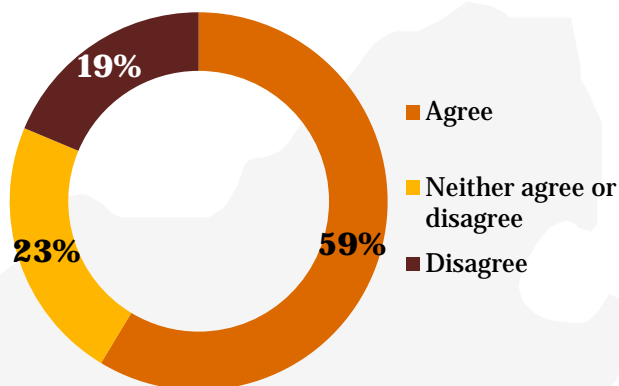
Barriers



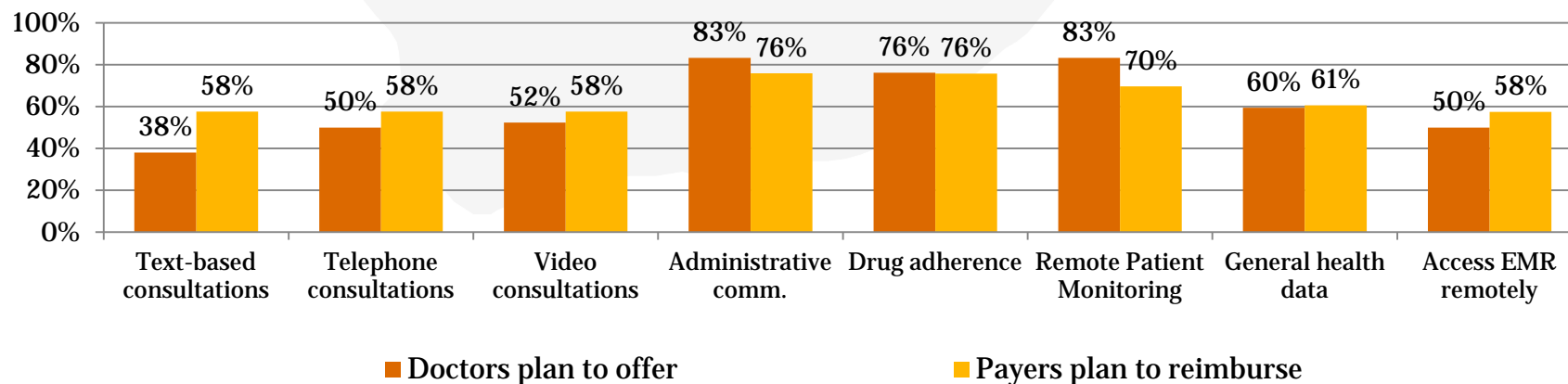
South Africa - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



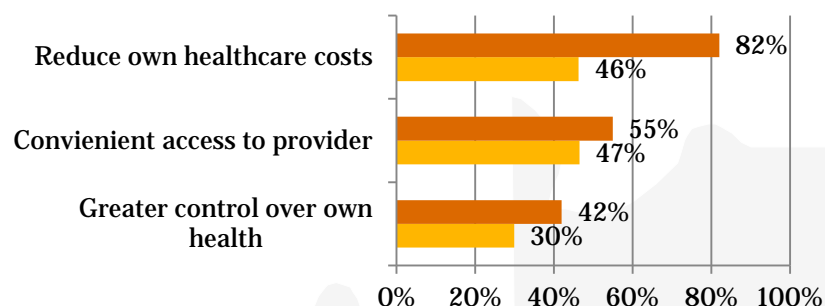
South Africa - Top 3 drivers and barriers for patients and physicians



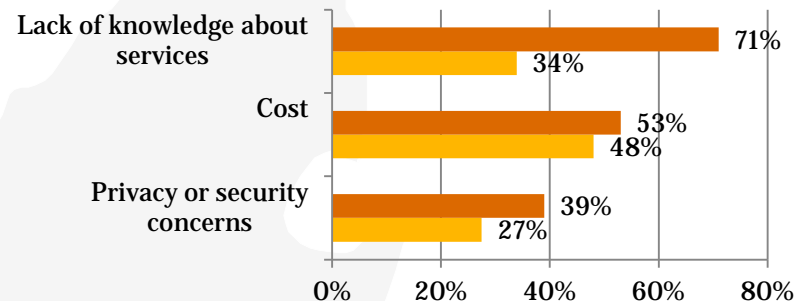
Patients

■ South Africa ■ Emerging countries (excl. South Africa)

Drivers

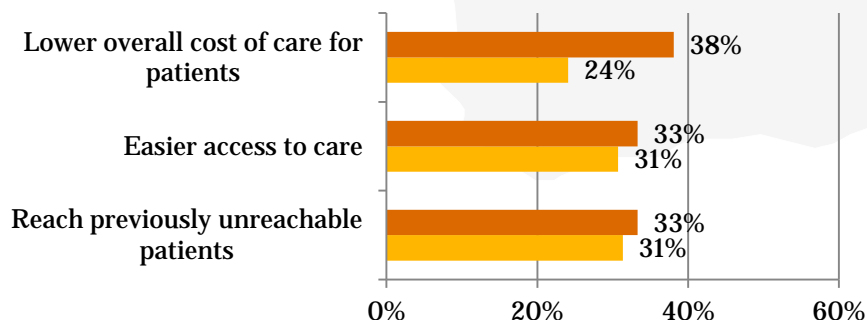


Barriers

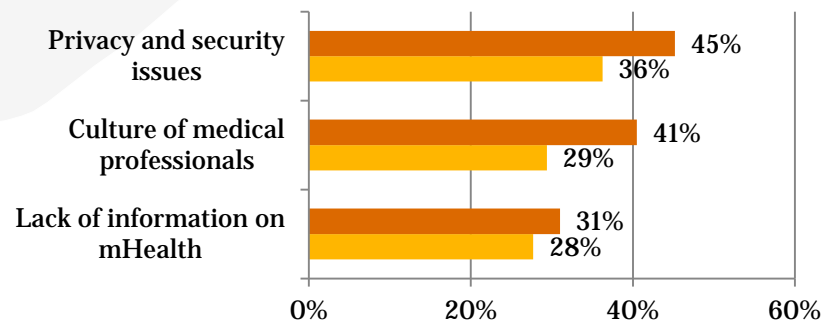


Physicians

Drivers



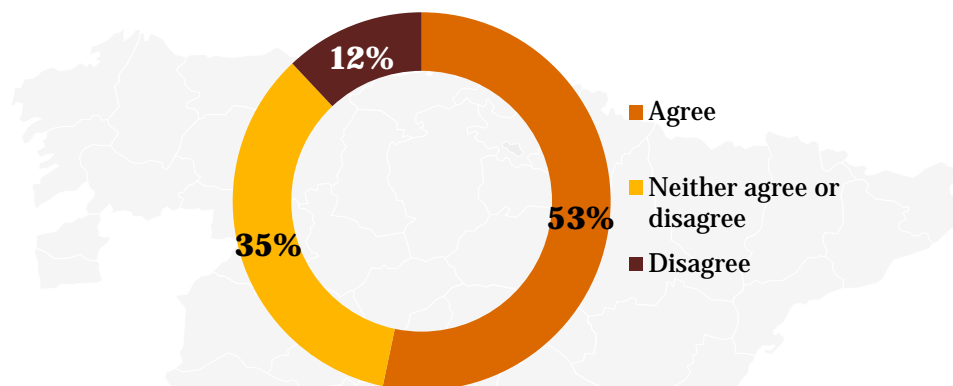
Barriers



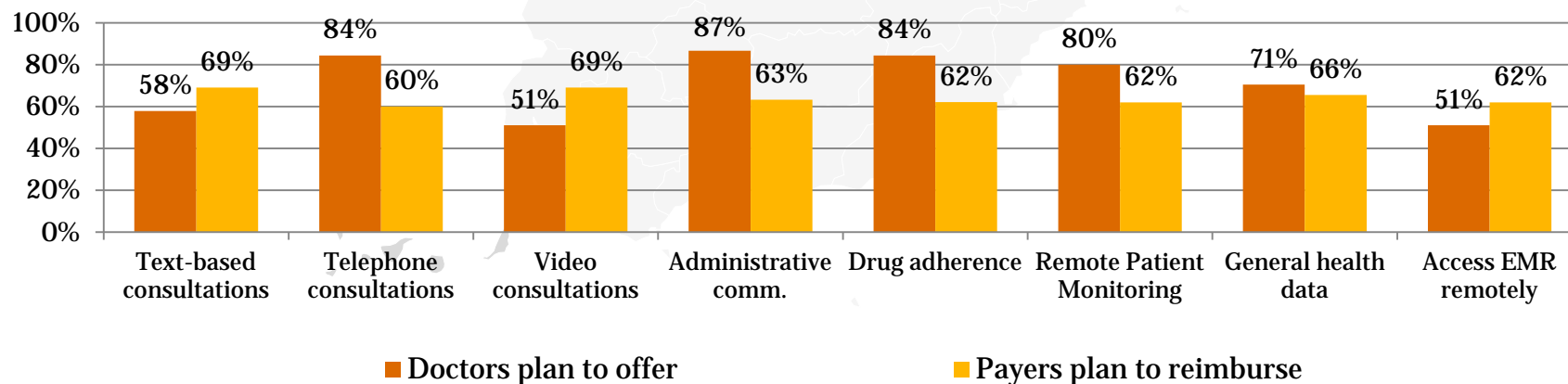
Spain - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



Spain - Top 3 drivers and barriers for patients and physicians

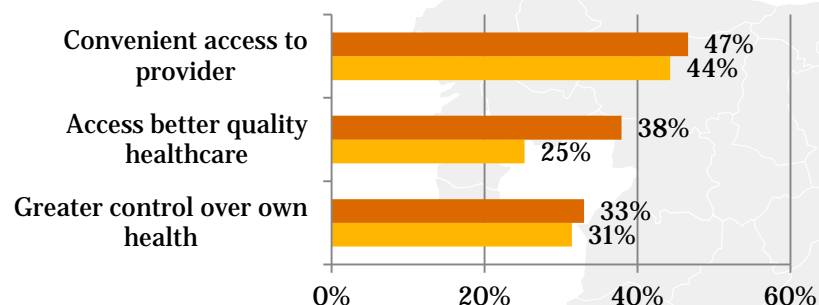


Patients

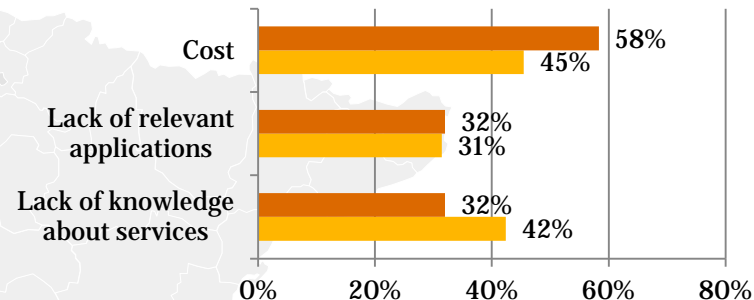
Spain

Developed countries (excl. Spain)

Drivers

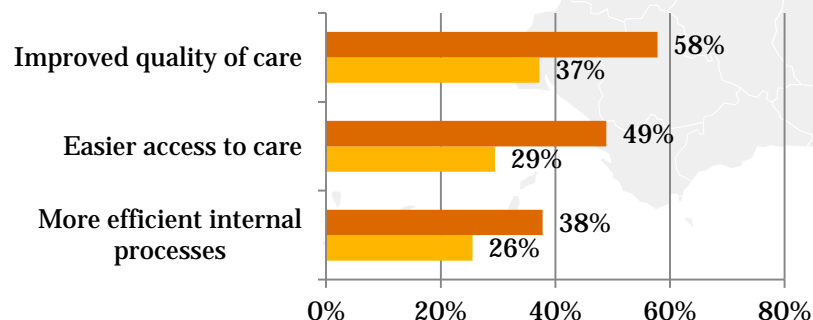


Barriers

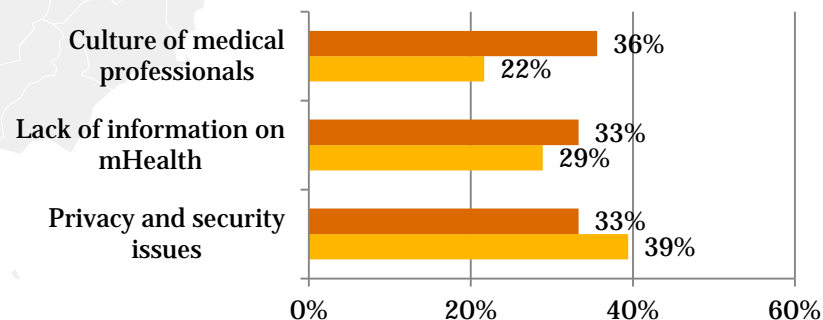


Physicians

Drivers



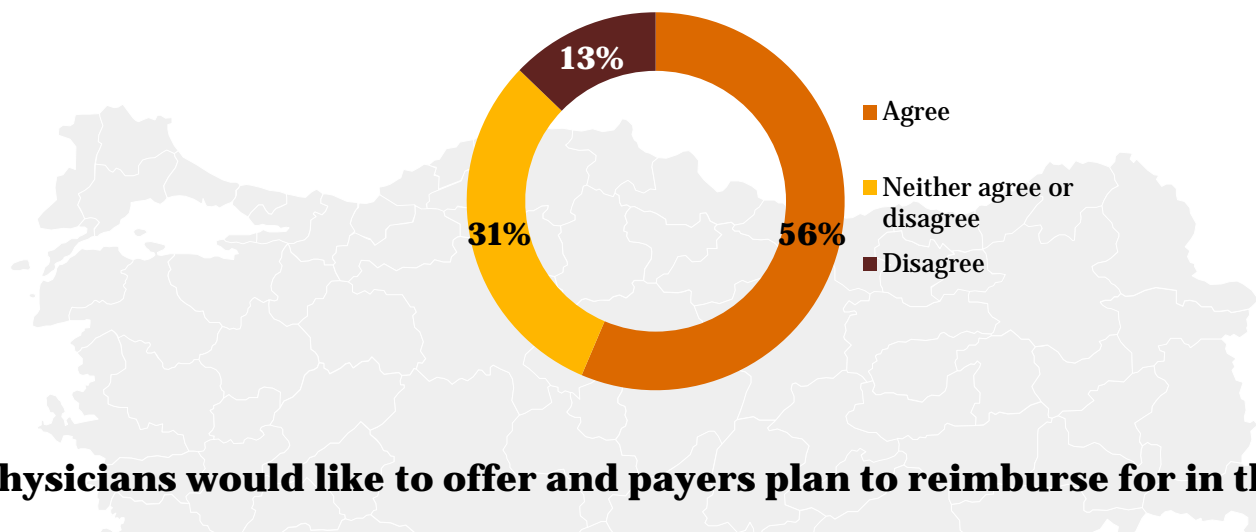
Barriers



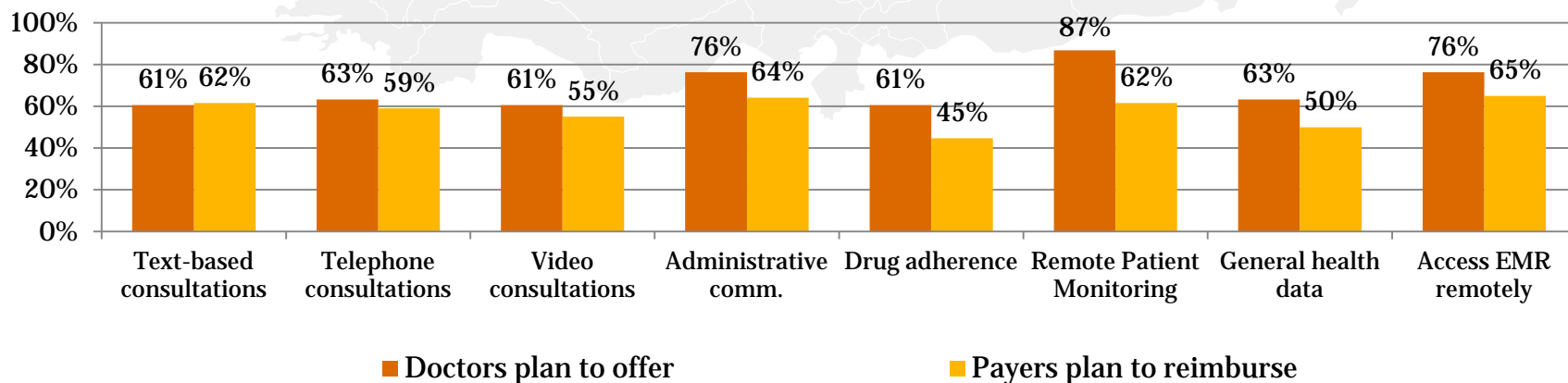
Turkey - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



Turkey - Top 3 drivers and barriers for patients and physicians

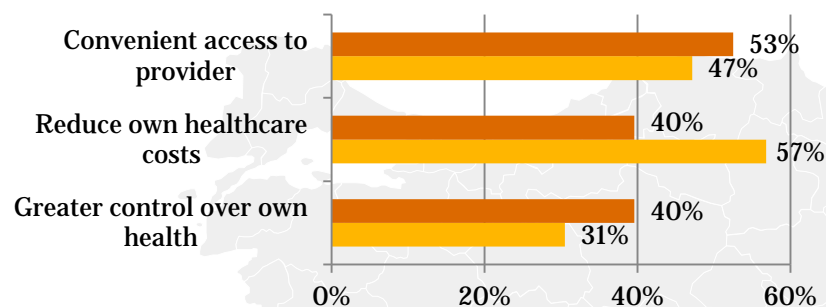


Patients

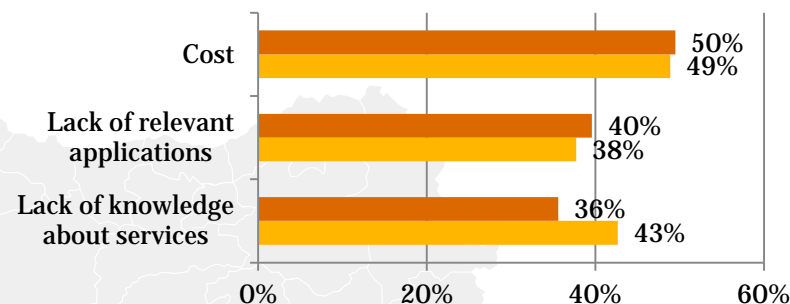
■ Turkey

■ Emerging countries (excl. Turkey)

Drivers

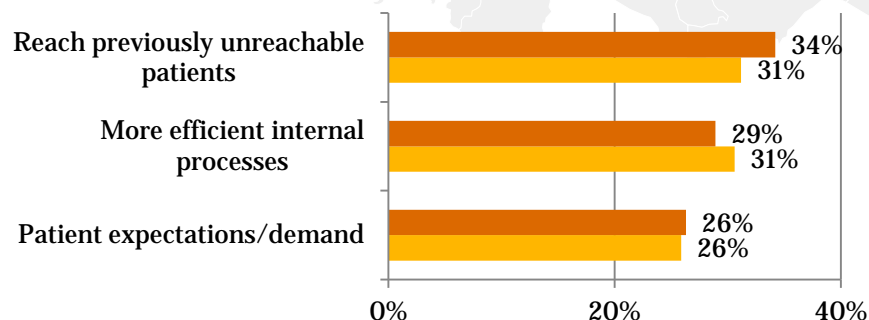


Barriers

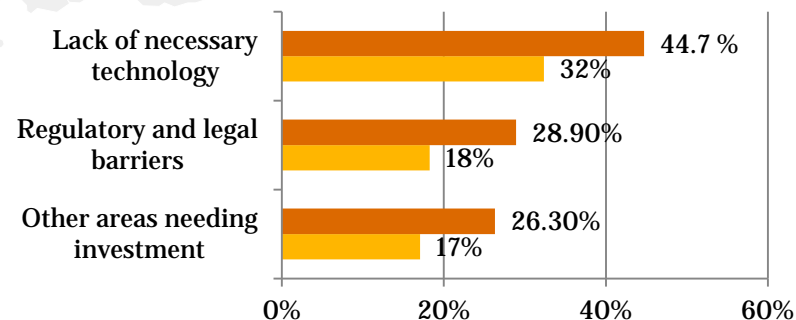


Physician

Drivers



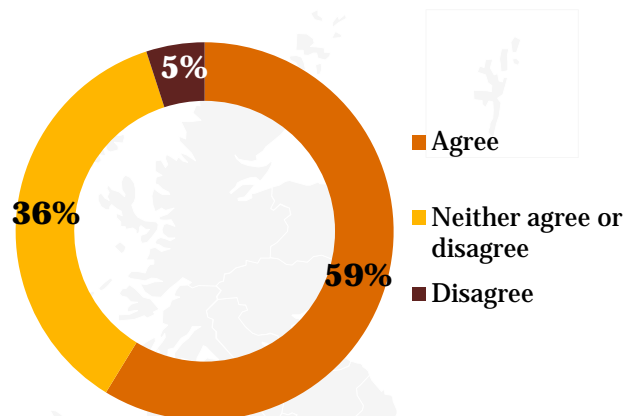
Barriers



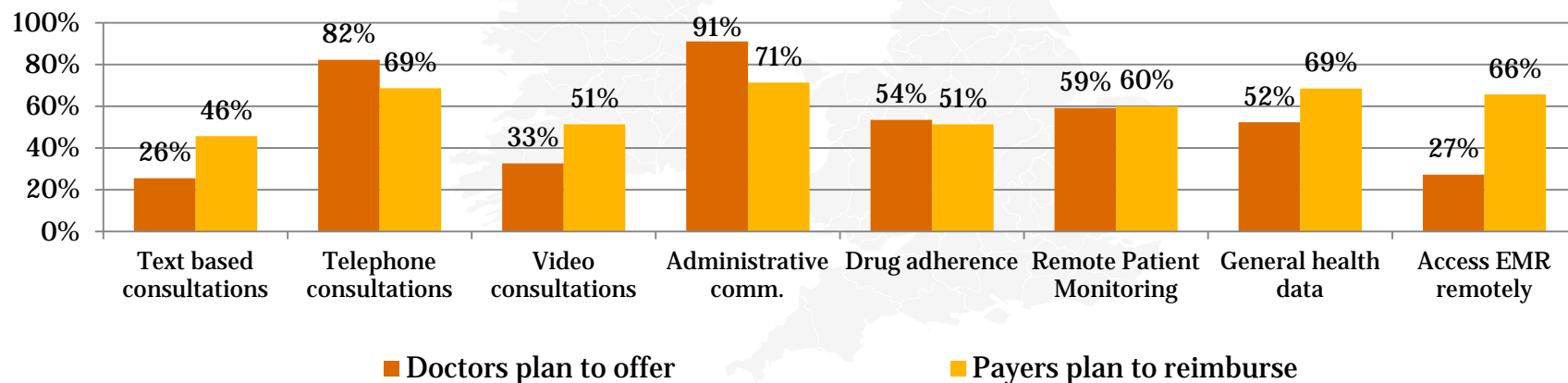
United Kingdom - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



United Kingdom - Top 3 drivers and barriers for patients and physicians

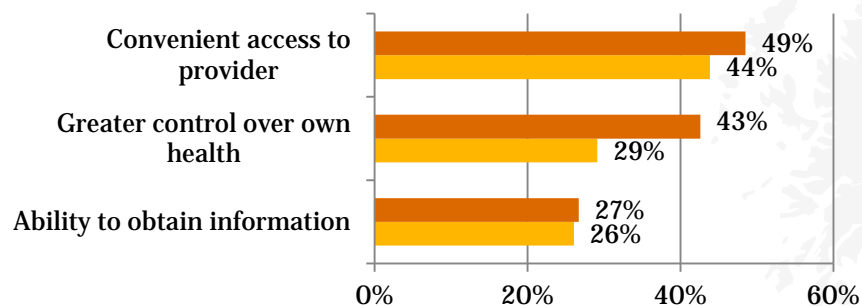


Patients

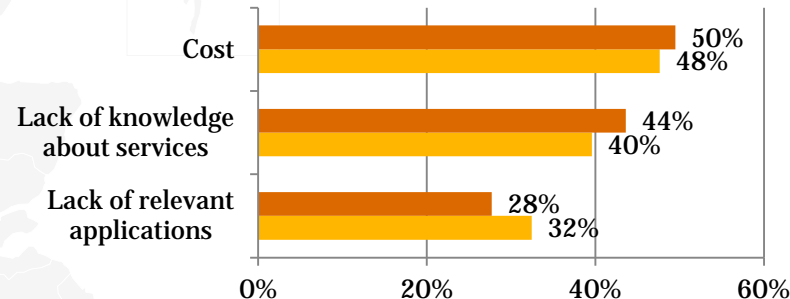
■ UK

■ Developed countries (excl. UK)

Drivers

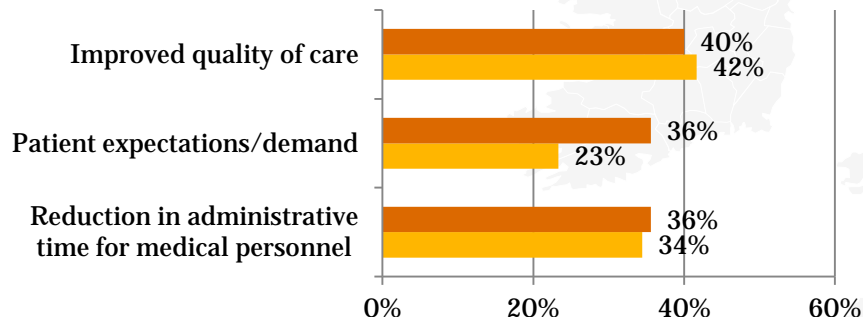


Barriers

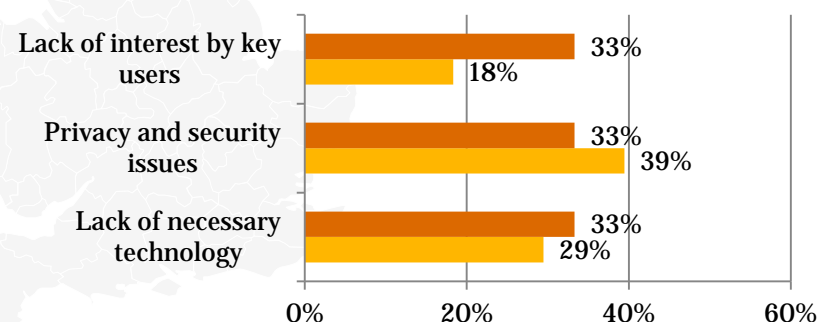


Physicians

Drivers



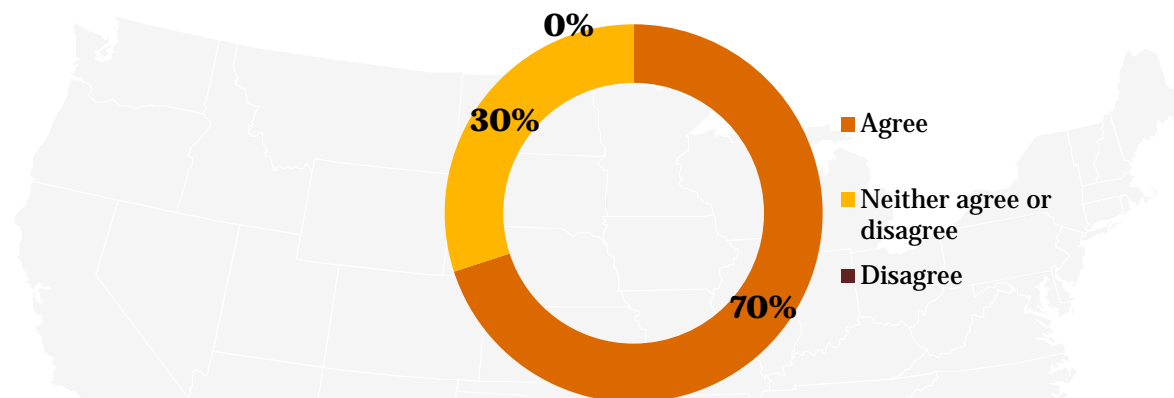
Barriers



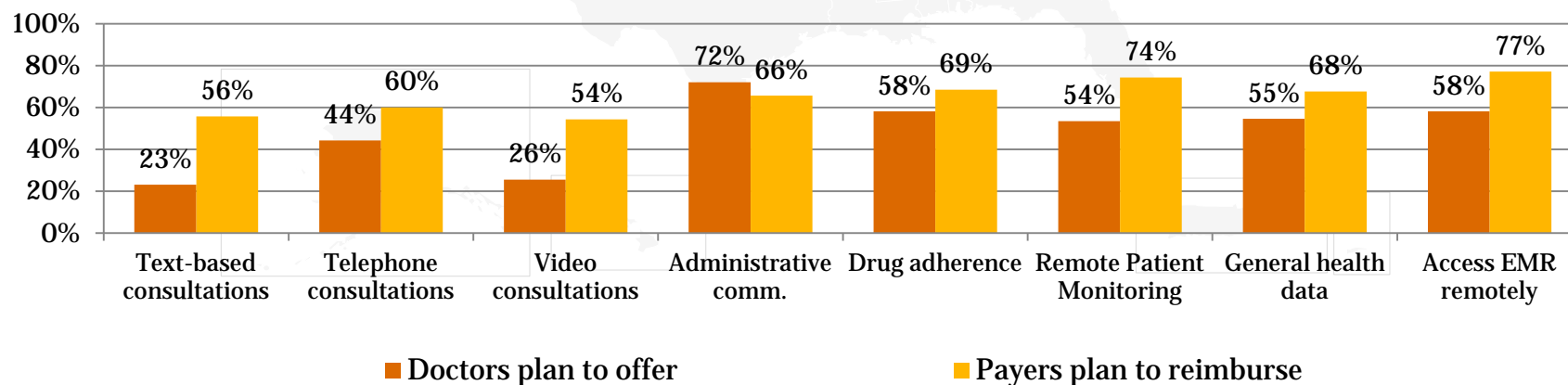
United States - Potential and services



Widespread adoption of mHealth services in my country is inevitable in the near future



Services physicians would like to offer and payers plan to reimburse for in the next 3 years



United States - Top 3 drivers and barriers for patients and physicians

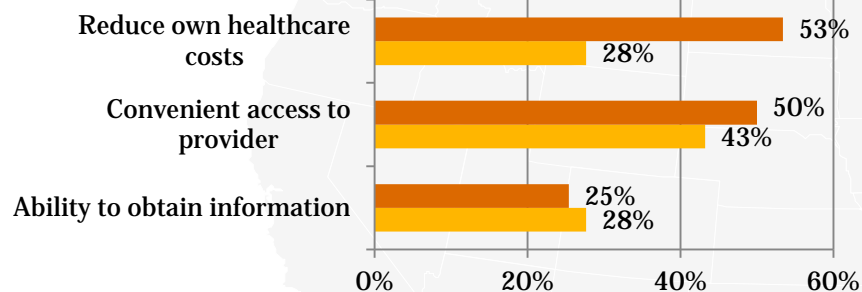


Patients

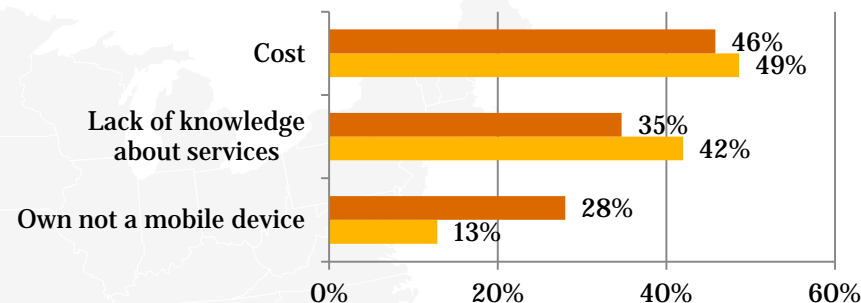
■ US

■ Developed countries (excl. US)

Drivers

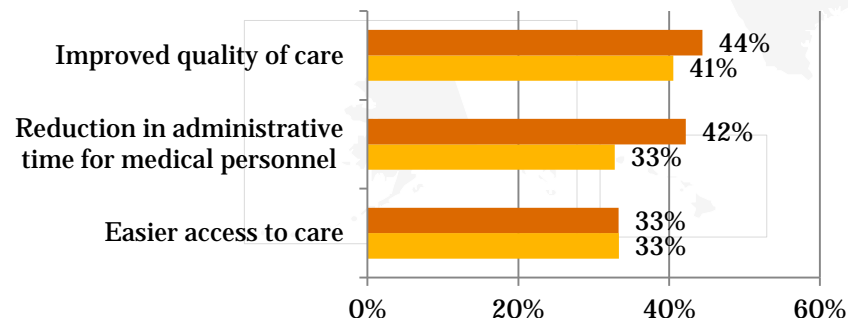


Barriers

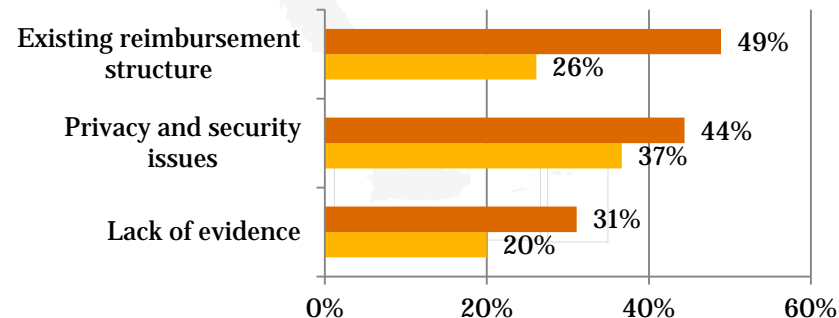


Physicians

Drivers



Barriers



5. Global contacts

Global contacts

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Appendix

mHealth scorecard – Detailed scores per dimension

Area	South Africa	India	Brazil	US	Germany	Spain	China	Denmark	Turkey	UK
Overall Score	6.0	5.7	5.6	5.2	5.1	5.1	5.0	4.8	4.7	4.7
Awareness and openness	5.5	7.0	6.2	3.5	4.4	5.1	7.0	3.1	4.9	2.4
Encouraging environment	6.6	7.1	7.0	2.8	4.7	6.1	5.8	3.9	4.8	3.0
Current use	4.3	6.9	5.3	4.2	4.1	4.1	8.3	2.4	5.0	1.8
Regulatory environment, reimbursement and business model	6.8	5.8	6.7	4.6	5.9	6.8	3.3	6.0	5.5	6.6
Reimbursement and business model	7.3	6.8	7.4	4.2	5.3	6.0	3.9	6.4	5.4	5.4
Encouraging regulatory environment	6.3	4.9	6.0	5.0	6.5	7.6	2.8	5.6	5.5	7.7
Technology	5.9	3.2	4.3	6.8	6.0	4.6	3.7	7.3	4.6	5.7
Access and security	7.1	4.8	6.5	5.2	5.0	4.3	3.0	6.6	4.6	5.9
Interoperability	4.7	1.6	2.2	8.5	6.9	5.0	4.5	8.1	4.7	5.5
Impact	6.0	6.6	6.0	5.3	4.2	2.9	5.9	4.0	3.8	4.0
Impact on institution	6.5	6.7	6.7	4.3	4.7	3.7	6.4	4.0	3.8	3.9
Impact on Healthcare system	5.4	6.5	5.3	6.3	3.6	2.2	5.4	3.9	3.9	4.2

Questions per dimension

1 Awareness and openness

1.1 Encouraging environment

Doctors encouraging patients to adopt a range of mHealth applications and services

Patients expecting that mHealth applications/services will improve the quality of healthcare they receive in the next 3 years.

Patients expecting that mHealth applications/services will make healthcare substantially more convenient in the next 3 years

Percentage of patients familiar with the terms “mobile health” or “mHealth”

Percentage of patients who would be interested in using mHealth applications/services

Patients who are willing to pay more than \$5 annually for a service - median from a set of services

1.2 Current use

Patients using mHealth services to manage their personal healthcare

Doctors using mHealth services in managing their personal healthcare

Doctors who use mobile internet at work to provide healthcare

Doctors who have begun to offer services via mobile devices

2 Regulatory environment, reimbursement and business model

2.1 Reimbursement and business model

Doctors who say that existing payment structures for health services discourage them from taking advantage of potential efficiencies in mHealth

Doctors who say that today’s mHealth market has exciting possibilities but too few proven business models

Patients willing to pay annually for an application/service more than \$5

Patients expecting that mHealth applications/services will substantially reduce their overall healthcare costs in the next 3 years

2.2 Regulatory and legal environment

Doctors believing mHealth advances are being held up by regulation created for older technologies that does not translate well to newer ones

Payers who say that the regulatory and legal framework are leading barriers to greater adoption of mHealth applications or services

Providers who say that the regulatory and legal framework are leading barriers to greater adoption of mHealth applications or services

Questions per dimension (cont.)

3 Technology

3.1 Access and security

Doctors with access to mobile internet at work

Percentage of doctors considering their internet access at work very secure

Mobile penetration rate (Source: ITU)

3.2 Interoperability

Patients frustrated by incompatibilities of mHealth solutions

Organisations that are reluctant to invest heavily in mHealth until the technology becomes more standardised, or interoperable

4 Impact

4.1 Institutional

Doctors expecting a noticeable effect on their medical care from mHealth - Currently

Doctors expecting a noticeable effect on their medical care from mHealth - In three years

Doctors expecting a positive impact on relationships with patients

Doctors expecting a positive impact on internal operations

4.2 Healthcare

Patients who are expecting little effect on healthcare through mHealth

Patients who are expecting mHealth services will improve a great deal in the next three years

Patients who are considering mHealth as a more effective way to adopt healthier lifestyle

Doctors expecting inevitable widespread adoption of mHealth applications and services is in the near future (6)

Detailed results of drivers and barriers for patients

Drivers

Drivers	Total	
Reduce own healthcare costs	444	43.2 %
Convenient access to provider	477	46.4 %
Ability to obtain information	289	28.1 %
Encouragement from my healthcare provider	153	14.9 %
Encouragement from healthcare payer	123	12.0 %
Greater control over my own health	329	32.0 %
Manage aspects of my life from my mobile phone	104	10.1 %
Manage a particular medical condition	149	14.5 %
Access to better quality healthcare	261	25.4 %
Access to a greater choice of applications	97	9.4 %
Other	32	3.1 %
Total	1027	100.0 %

Barriers

Barriers	Total	
Cost	498	48.5 %
Lack of relevant applications	357	34.8 %
My providers are unwilling to work with mHealth	190	18.5 %
Privacy or security concerns	295	28.7 %
Lack of knowledge about services	419	40.8 %
Inconvenience and time involved in setting up mHealth	117	11.4 %
Already satisfied with current possibilities	124	12.1 %
Incompatible mHealth applications/services therefore takes more time to set up mHealth	92	9.0 %
Difficulties understanding the content of services	104	10.1 %
Don't own a mobile device	134	13.0 %
Other	17	1.7 %
Total	1027	100.0 %

Detailed results of drivers and barriers for physicians

Drivers

Drivers	Total	
Lower overall cost of care for patients	109	25.2 %
Easier access to care	140	32.3 %
Reach previously unreachable patients	122	28.2 %
Improved quality of care	154	35.6 %
More efficient internal processes	126	29.1 %
Patient expectations/demand	112	25.9 %
Expectation of medical personnel	57	13.2 %
Opportunity to provide new services	75	17.3 %
Ubiquity of smartphones	69	15.9 %
Encouragement by regulators	60	13.9 %
Reduction in administrative time for medical personnel	137	31.6 %
Other, please specify	2	0.5 %
Total	433	100.0 %

Barriers

Barriers	Total	
Other areas needing investment	83	19.2 %
Existing reimbursement structure	132	30.5 %
Lack of compatibility	111	25.6 %
Lack of evidence	96	22.2 %
Lack of necessary technology	140	32.3 %
Regulatory and legal barriers	103	23.8 %
Lack of interest by key users	96	22.2 %
Privacy and security issues	159	36.7 %
Culture of medical professionals	118	27.3 %
Lack of information on mHealth	126	29.1 %
Other, please specify	5	1.2 %
Total	433	100.0 %

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