Quick to Market:
Implementing a rapid innovation process to drive customer satisfaction

Jann Holland, VP Marketing & Corporate Communications, CoxHealth
Scott Rogers, System Director of Innovation, CoxHealth
Learning Objectives

To be Quick to Market:

1. Learn how to establish a culture of innovation
2. Understand the essential components of an innovation regimen
3. Learn how to report to leadership to maintain accountability
4. Learn how the rapid innovation process is part of an overall innovation roadmap
Agenda

1. The need to be Quick to Market
2. CoxHealth innovation journey
3. Learn key tools via CoxHealth case study
4. What would you do – a new project scenario
5. Q & A
Icebreaker

- 10 words or less: Name a customer-facing problem you have been trying to solve at work
  - Example: Empower the patient to make informed urgent care decisions
- Use that problem to frame our Quick to Market discussion
The Need

Quick to Market
“How did you go bankrupt?”
“Two ways: gradually and then suddenly.”

-Ernest Hemingway “The Sun Also Rises”
Consumerization of Health Care

Our highest priority is satisfying our customers... except when it is hard... or unprofitable... or we're busy.
Consumerization of Health Care

- Customized Services
- Improving Customer Experience
- Increasing Price Transparency
- Managing Store Layout and Driving Foot Traffic
- Increasing Adoption of Technology
- Incentivizing Collaboration

Retail Health Care

- Traditional Health Systems
- Primary Care Physicians
- Government and Commercial Payers
- Retail Pharmacy
- Retail Clinics
- Urgent Clinics
- Pharmacy Benefit Managers

Deloitte Insights 2015
The Journey

Establishing a culture of innovation
2013: The Catalyst

- OUCH!

- Key themes:
  - Follow others
  - Resources aren’t invested
  - Lag **behind** competition
  - **Culture:** 2/3 Disagree or Strongly Disagree
  - Employees don’t know how
At the most basic level

Culture influences Process, which reinforces Culture

We didn’t have an Innovation Process!
Innovation Accelerator: Piloting an ideation process

- **The Event: Years 1 & 2**
  - 27 hours start to finish
  - 50 employees
  - 1 minute pitch
  - 7 ideas crowd-sourced
  - 5 minute Presentation
  - 1 winner

#InnovationFromTheInside
Lots of ideas, but…
Lessons Learned

- Not linked to Strategy
  - “One more thing to do…”

- Not enough horsepower
  - “Too many ideas, not enough resources”

- No structure for accountability
  - “Why should I do this?”

- Needed an implementation process
Year 3: Implementation Process & Accountability Structure

1. IN-90: Speed, Momentum, and Agility:
   - Implement Quickly: Go / No-Go decision in 90 days
   - Fail Fast & Fail Forward

2. Accountability Structure
   - Weekly Transformation Team:
     - VP Clinical Ops
     - VP Strategy
     - VP Marketing
     - Dir Innovation
     - Dir PI
     - Dir Analytics
     - Dir Budgeting/Finance
   - Executive Steering Committee:
     - CEO, CFO, Sr. VP Hospitals, CIO, VP HR

3. Access to Strategic Budget: $1M
A different story in 2019
The Tools

An innovation regimen
The Essential Components of an Innovation Regimen

To be Quick to Market you need:
1. The Innovation Mindset
2. Innovation Framework
3. Agile Implementation Process
Essential Component: An Innovation Mindset

**IN90 Innovation Mindset**

1. **Focus on Human Needs**
   - Build what people need, not what you want to build.

2. **Listen Deeply**
   - Listen for insight, not validation, to reduce risk.

3. **Show Don’t Tell**
   - Create experiences, visuals and stories to engage imaginations.

4. **Simplify Your Vision**
   - Create a clear vision out of messy problems to inspire ideas.

5. **Diversity Matters**
   - Because when everyone thinks alike, no one thinks very much.

6. **Build Only What You Need**
   - Focus on solving the biggest problems, not every problem.

7. **Experiment and Iterate**
   - Because prototyping is how you have conversations with your ideas.

8. **Go for Great**
   - In a world that settles for less, fight for greatness.
Essential Component: An Innovation Framework

Desirability
(Concept Risk - What do customers want?)

Feasibility
(Product Risk - What can we build or create?)

Viability
(Execution Risk - What can we profitably deliver?)

Intersection of Innovation
Essential Component: An Agile Implementation Process

Boot Camp
Offsite project preparation

Desirability
Sprint 1: Organize Metrics Assumptions
Sprint 2: Tweak MVP Educate Build
Sprint 3: Prototype Focus Group Insights

Feasibility
Sprint 4: Modify Iterate Schedule
Sprint 5: Prototype 2 Test Group Insights

Viability
Sprint 6: Modify Iterate Finalize

Launch
Test Track Tweak

IN-90: How to go Quick to Market in 90 days
Agile Action Plan

- Projects start 1st or 16th of each month
- 2-week “sprints”
- Project Evaluations 15th & 30th (last day) of each month
- Prototypes ready for user review
  - Prototype 1.0 between day 30-45 (≈4-6 weeks)
  - Prototype 2.0 by day 60-75 (≈8-10 weeks)
  - Prototype 3.0 (MVP launch) day 90 (≈12 weeks = end of 6 sprints)
# IN 90 - RPM SPRINT 5 - 6/21/2019

**Notes**

<table>
<thead>
<tr>
<th>Date</th>
<th>Type</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>21-Jun</td>
<td>Workflow</td>
<td>Duplicate Processes: Scott/ Joanna/ Tracy. David R. is planning to speak to other VP’s re: duplicate processes. Meeting not yet scheduled.</td>
</tr>
<tr>
<td>21-Jun</td>
<td>Financial</td>
<td>Research RPM Codes/billing: Mike/ Lori. Lori and Mike have another call scheduled w/Vital Tech customer-physician who is billing RPM-scheduled next wed. DR. Krenn would like to join if possible. Reschedule to fit Dr. K schedule?</td>
</tr>
<tr>
<td>21-Jun</td>
<td>Workflow</td>
<td>APP’s: Stacey. Sending workflow, workflow includes RPM now. Continue monthly mtg w/ APPs.</td>
</tr>
<tr>
<td>21-Jun</td>
<td>Workflow</td>
<td>APP’s: Tracy. Tracy talked with Amanda to look at current processes. Working together to utilize Pop Health processes and communication to help with efficiency.</td>
</tr>
<tr>
<td>21-Jun</td>
<td>IT</td>
<td>Updates to HealtheCare: Martha. Meeting scheduled for 6/26 w/ Meagan and Stacy to review final workflow.</td>
</tr>
<tr>
<td>21-Jun</td>
<td>Focus Group</td>
<td>Provider Focus Group: Lori/ Dr.Krenn. Oxford needs to assure that communication is efficient for providers and appropriate to meet physician needs to assure buy-in.</td>
</tr>
<tr>
<td>21-Jun</td>
<td>Focus Group</td>
<td>Focus Group Patient/ Caregivers: Joanna/Mike/ Lori. Met with PFAC. They thought that a rewards system would be a good incentive for patients - if possible. $25 seemed reasonable for a copay, although some patients may have an issue paying. Develop marketing materials that showed cost vs. benefit.</td>
</tr>
</tbody>
</table>
The Case Study: Save My Spot

Wait at home

With SAVE MY SPOT, simply go online, choose your urgent care or walk-in clinic location and time – and you're in line. Sickness isn't planned, but your visit can be.

coxhealth.com/savemyspot
Case Study:
Navigating the Process via Maps
Desirability – The Concept Risk

Desirability

(Concept Risk - What do customers want?)

Feasibility

(Product Risk - What can we build or create?)

Viability

(Execution Risk - What can we profitably deliver?)
Desirability: Problem Statement Map

- Get everyone on the same page
- Know your problem, impact, context and constraints
- Generate at SMART Goal

Avoid Shiny New Toy Syndrome

Problem Statement Map

- What is the problem you are trying to solve?
- What is the ultimate impact you’re trying to have?
- Explain some of the context and constraints you’re facing.
- Tweak your original problem statement to be a SMART Goal.
Our Problem Statement Map

- **Obstacles:**
  - Overuse of the ER
  - Long wait times
  - Low awareness of other CoxHealth care options
  - No ability to select a time that works best for me

- **Right care | Right now:**
  - Empower consumer to make an informed decision
  - Reduce door-to-door time
  - Elevate patient satisfaction
Desirability: Audience Map

- Who is the target (usually the patient / customer)?
- Who interacts with the users?
- Who are the influencers (those who influence the Users or those with direct interactions)?
- Which groups are “For Us” or “Against Us”?

_Understand WHO you need to learn about_
Our Audience Map
Desirability: Destination Map

- What you DON’T want to happen?
  - What are you afraid of?

- What DO you want?
  - What are your visions?

Establish your Goal Posts
Our Destination Map
Desirability - Knowledge Gap Map

- Facts we know
- What we think we know
- What we don’t know but can find out
- What we don’t know and don’t think we can find out

The goal is to know the important things, and forget about the rest
# Our Knowledge Gap Map

## Knowledge Gap Map

<table>
<thead>
<tr>
<th>What do we know?</th>
<th>What do we think we know?</th>
<th>What don’t we know?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Customers want Card for both Live and Limit cards.</td>
<td>Most customers have a smart phone.</td>
<td>But could find out...</td>
</tr>
<tr>
<td>Confusion - Symptoms at each location.</td>
<td>Impact different @ each location.</td>
<td>Reasonable Demographics derived from user click trends.</td>
</tr>
<tr>
<td>Peak vs slow times.</td>
<td>Feedback via surveys.</td>
<td>Location specific impact.</td>
</tr>
<tr>
<td>ED $90 vs UC $75.</td>
<td>Segmentation of UC vs non-users.</td>
<td>Other similar apps.</td>
</tr>
<tr>
<td>Demand is variable.</td>
<td>App will be feasible.</td>
<td>Problem of user integration.</td>
</tr>
<tr>
<td></td>
<td>Competitor’s solution up Starts.</td>
<td></td>
</tr>
</tbody>
</table>
Desirability: Journey Map

1. Map the process
2. Look for pain points - Track the customers’ emotions. Compensating behaviors?
3. Look for large swings or big negatives
4. Brainstorm and focus on those key steps to create a consistent / better experience
Our Journey Map
Who should we talk to?

- Stressed out customers
- Potential allies
- Potential blockers
- Potential collaborators
Feasibility – The Product Risk

Desirability
(Concept Risk - What do customers want?)

Viability
(Execution Risk - What can we profitably deliver?)

Feasibility
(Product Risk - What can we build or create?)

Feasibility

(Profitably deliver?)

Desirability

(Concept Risk - What do customers want?)

Viability

(Execution Risk - What can we profitably deliver?)
Feasibility: Minimum Viable Product

1. Who is the Target, what do they need, what problem does it solve for them?

2. Who are the Blockers, and what do they need to say “YES”?

3. Who are the Decision Makers, and what do they need to say “YES”?

Minimum Viable Product Map

<table>
<thead>
<tr>
<th>The Decision Maker</th>
<th>Users</th>
<th>Blockers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needs these jobs done.</td>
<td>Needs these jobs done.</td>
<td>Needs these jobs done.</td>
</tr>
<tr>
<td>So we need to provide this minimum functionality.</td>
<td>So we need to provide this minimum functionality.</td>
<td>So we need to provide this minimum functionality.</td>
</tr>
<tr>
<td>That will result in these benefits.</td>
<td>That will result in these benefits.</td>
<td>That will result in these benefits.</td>
</tr>
</tbody>
</table>
## Our Minimum Viable Product

<table>
<thead>
<tr>
<th>Decision Maker</th>
<th>Users</th>
<th>Blockers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amanda – Ops $</td>
<td>Customers</td>
<td>Registrations</td>
</tr>
<tr>
<td>Jann - $ for Marketing</td>
<td></td>
<td>Legal/Compliance</td>
</tr>
<tr>
<td>Si3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Need these jobs done..
- **Amanda**: ROI & Measures of Success, operational buy-in
- **Jann**: Selling story to the “why”, resources to develop the plan, link to strategy, intelligence around customer base

### Need these jobs done..
- **Amanda**: Quick & easy intuitive
- **Jann**: Gives me information to let me make a personal decision

### Need these jobs done..
- **Si3**: Doesn’t interfere with Cerner

### So we need to provide this minimum functionality..
- **Drive the metrics**
- **Provides info to connect to the “why”**
- **Provide info for the metrics**
- **Training plan**

### So we need to provide this minimum functionality..
- **Simple solution for mobile device**
- **Staff works with me and the decision I made within the app**

### So we need to provide this minimum functionality..
- **Reg**: Training and education that will smooth demand not increase workload
- **Legal/Compliance**: Passes compliance testing
- **Si3**: Cloud-based non-supported solution

### That will result in these benefits..
- **Amanda** – commercialized innovation that benefits the organization
- **Jann** – implementing an idea that creates demand for our product

### That will result in these benefits..
- **Me getting in and out more quickly at a convenient time and location**
- **Works to reduce door-to-door**
- **Creates a better experience**

### That will result in these benefits..
- **Reg**: a registration process that doesn’t make my job harder
- **Legal/Compliance**: No adverse compliance or political issues
- **Si3**: No additional resources
Viability – The Market Risk

Desirability

(Concept Risk - What do customers want?)

Feasibility

(Product Risk - What can we build or create?)

Viability

(Execution Risk - What can we profitably deliver?)
## Viability – Cost Structure

### Proforma Template

<table>
<thead>
<tr>
<th>Innovation Accelerator</th>
<th>Proforma</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Assumptions</th>
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<tbody>
<tr>
<td><strong>Volume</strong></td>
<td></td>
<td>1,000</td>
<td>1,200</td>
<td>1,500</td>
<td></td>
</tr>
<tr>
<td><strong>FTE's</strong></td>
<td></td>
<td>1.0</td>
<td>1.3</td>
<td>1.5</td>
<td></td>
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<tr>
<td><strong>Projected Revenue</strong></td>
<td></td>
<td>$42,000</td>
<td>$51,000</td>
<td>$65,000</td>
<td></td>
</tr>
<tr>
<td><strong>Projected Expenses</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salary &amp; Benefits</td>
<td></td>
<td>$35,000</td>
<td>$45,500</td>
<td>$52,500</td>
<td></td>
</tr>
<tr>
<td>Furniture &amp; Equipment</td>
<td></td>
<td>$8,000</td>
<td>$10,000</td>
<td>$12,000</td>
<td></td>
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<tr>
<td>Supplies</td>
<td></td>
<td>$2,000</td>
<td>$2,200</td>
<td>$2,600</td>
<td></td>
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<tr>
<td>Other Expenses</td>
<td></td>
<td>$2,500</td>
<td>$3,000</td>
<td>$3,500</td>
<td></td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td></td>
<td>$47,500</td>
<td>$50,700</td>
<td>$58,500</td>
<td></td>
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<tr>
<td><strong>Net Income/(Loss)</strong></td>
<td></td>
<td>$(5,500)</td>
<td>$300</td>
<td>$5,500</td>
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<tr>
<td><strong>Ratios</strong></td>
<td></td>
<td></td>
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<tr>
<td>Revenue/Volume</td>
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<tr>
<td>Revenue/FTE</td>
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<td>$39,21</td>
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<td>Volume/FTE</td>
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<tr>
<td>Expense/Volume</td>
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<td>$47.50</td>
<td>$42.25</td>
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<tr>
<td>Net Income/(Loss)/Volume</td>
<td></td>
<td>$(5.50)</td>
<td>$2.25</td>
<td>$3.67</td>
<td></td>
</tr>
</tbody>
</table>
Save My Spot

- 77% of patients waited less than 10 minutes to be taken to a room.
- 52% of patients stated that SMS influenced their decision on where to go for care.
- 95% of respondents said they would recommend SMS to friends and family.
- 18 minutes faster door-to-door time than standard urgent care walk-in
Accountability

Report and engage
Project: Save My Spot
Implementing a patient self-scheduling software solution in CoxHealth Urgent Care and retail clinics

Minimum Viable Product (MVP):
Implement the ER Express App in SGF/Ozark Urgent Cares by 2/15/18 to reduce Door-to-Door time by 10%

Key Measure of Success:
1. Door-to-Door (TAT)
2. Save My Spot Usage

90 Day Project Update:
- Save My Spot continues to bring in new patients
- Comments are unanimously positive
- RECOMMENDATION – Investigate additional opportunities within CoxHealth for Save My Spot technology vs. Cerner self-scheduling.

Timeline

<table>
<thead>
<tr>
<th>11/15/17</th>
<th>12/01/17</th>
<th>12/15/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sprint 1</td>
<td>Sprint 2</td>
<td>Sprint 3</td>
</tr>
<tr>
<td>11/15/17</td>
<td>12/01/17</td>
<td>12/15/17</td>
</tr>
<tr>
<td>Sprint 4</td>
<td>Sprint 5</td>
<td>Sprint 6</td>
</tr>
<tr>
<td>1/01/18</td>
<td>1/15/18</td>
<td>2/01/18</td>
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</table>

Project Status: Complete

Executive Sponsor: Amanda Hedgepeth / Jann Holland
Team Leader: Trina Hargis
Scrum Master: Scott Rogers / Kari DiCianni
Physician Champion: NA
Innovation in action

Growing our team of compassionate caregivers

See how enrollment efforts are helping us deliver better care and serve our patients. Page 2

Recruitment'sพัน(223,554),(346,726)(350,554),(473,726) grows our team of compassionate caregivers

Focus brings ideas to life

Dozens of our colleagues had the opportunity to innovate and expand on ideas during the 2018 Innovation Accelerator. Page 3

Recognition banquet and for April 19. Page 2
The Innovation Roadmap

Maintaining momentum
The Roadmap: Integrating Rapid Innovation

Short-term (< 1 year)
- Customer feedback
- Employee input
  (Innovation Accelerator)
- Environmental scanning

Near-term (1-2 years)
- Market research
- Leadership input
  (Horizons Challenge)
- Environmental scanning

Longer-term (> 2 years)
- Strategic plan
- Industry insight
- Emerging technology
  Environmental scanning

Corporate culture
Resources to balance
Problems to solve

Active IN-90 Projects

Watch List

Project Hopper
Quick to Market Projects on the Innovation Road Map

Active: Text Reminders

Hopper: 3D Printing Prosthesis

Interactive Voice-driven Chatbot
The Scenario Quiz

What would you do?
Situation:  
Want to implement text reminders

- Operations leader approaches you with a problem:
- We need to reduce the number of no-shows and maximize provider schedule efficiency. Others are using texting, how can we?

- What do you do first?
- Who would you engage?
- Our Ah-ha moment
- Data for first 3 weeks.
Three Key Take-Aways

1. Establish a culture of innovation – include Marketing as your VOC, start small to prove the value
2. Find a regimen that works for you, use a consistent process, move quickly
3. Maintain momentum – have a pipeline of ideas, an accountability structure, link them to strategy, and keep them in front of leaders, staff, and the community
Questions?

Please be sure to complete the session evaluation on the mobile app!
Jann Holland applies her 30 years of b-to-b and consumer retail marketing experience to drive awareness of and preference for CoxHealth, a regional health care system located in Springfield, MO. A cum-laude graduate of the University of Missouri School of Journalism, Jann has worked on nationally recognized brands such as Marriott Hotels & Resorts, Newell-Rubbermaid, Tyson Foods and Turner Broadcasting. Jann is the system's brand steward, overseeing marketing and corporate communications. In addition, she serves on a cross-functional innovation team whose goal is to improve efficiency, reduce costs and elevate customer satisfaction.

jann.holland@coxhealth.com
Scott Rogers is system director, performance integration and innovation at CoxHealth, a not-for-profit health system headquartered in Springfield, Mo. In that role, he works with leaders and employees across the system to capture and integrate ideas for change with the strategic direction of the organization. Prior to his switch to health care, Scott worked in manufacturing as a quality leader improving products and services across operations in the U.S., Mexico and Asia. His BS in industrial engineering and Lean Six Sigma certifications allow him to bring a continuous improvement mindset to the way health care is delivered in the region.
Bibliography/References

- Deloitte Center for Health Solutions *2015 Survey of US Health Care Consumers*, Deloitte Development, LLC