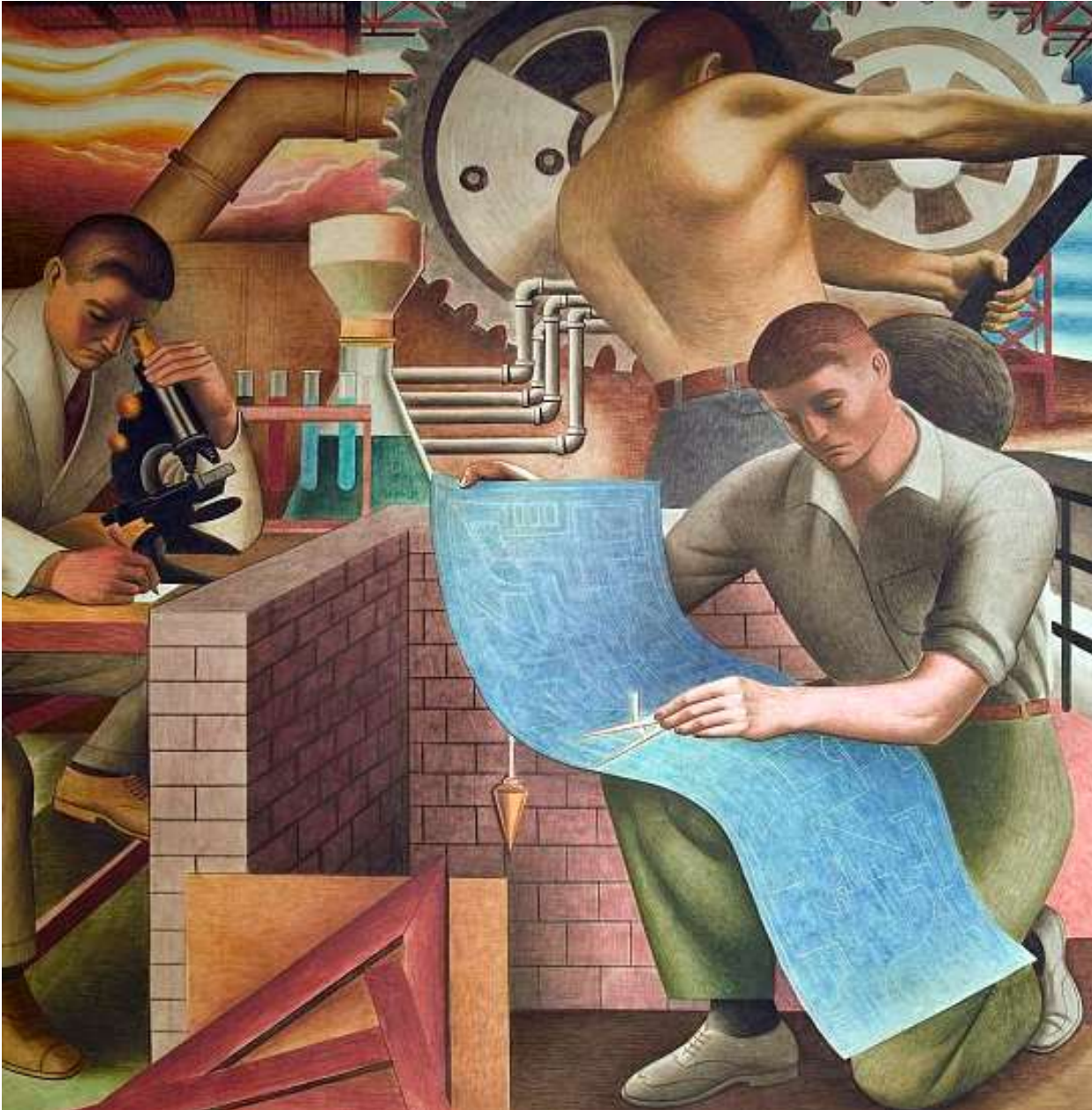


# POV On Health Care Startup's Go-To-Market Strategy

J.B. Davis, Co-Founder  
14 June 2015



# **1. Project Background**

## Health Care Startup identified opportunities to improve healthcare in [REDACTED]

- Market failure / white space = 30 million people in developing world not receiving adequate health care because of information disconnects between primary care physicians, physicians who receive referrals, hospitals, and others
- Founded as for-profit
- Strong CEO, staff
- Grassroots efforts = traction on gathering / organizing underlying data
- Networking = progress with key local and U.S. stakeholders
- Impact Engine, one of two impact investing funds that have invested in Health Care Startup, asked Month 16 to mentor
- Health Care Startup's initial request = prioritizing revenue opportunities within in-development platform
- This presentation = initial thought-starter on request



## **2. Strategic Frameworks**

To address request of prioritizing revenue opportunities, filtered business model through select Month 16 frameworks

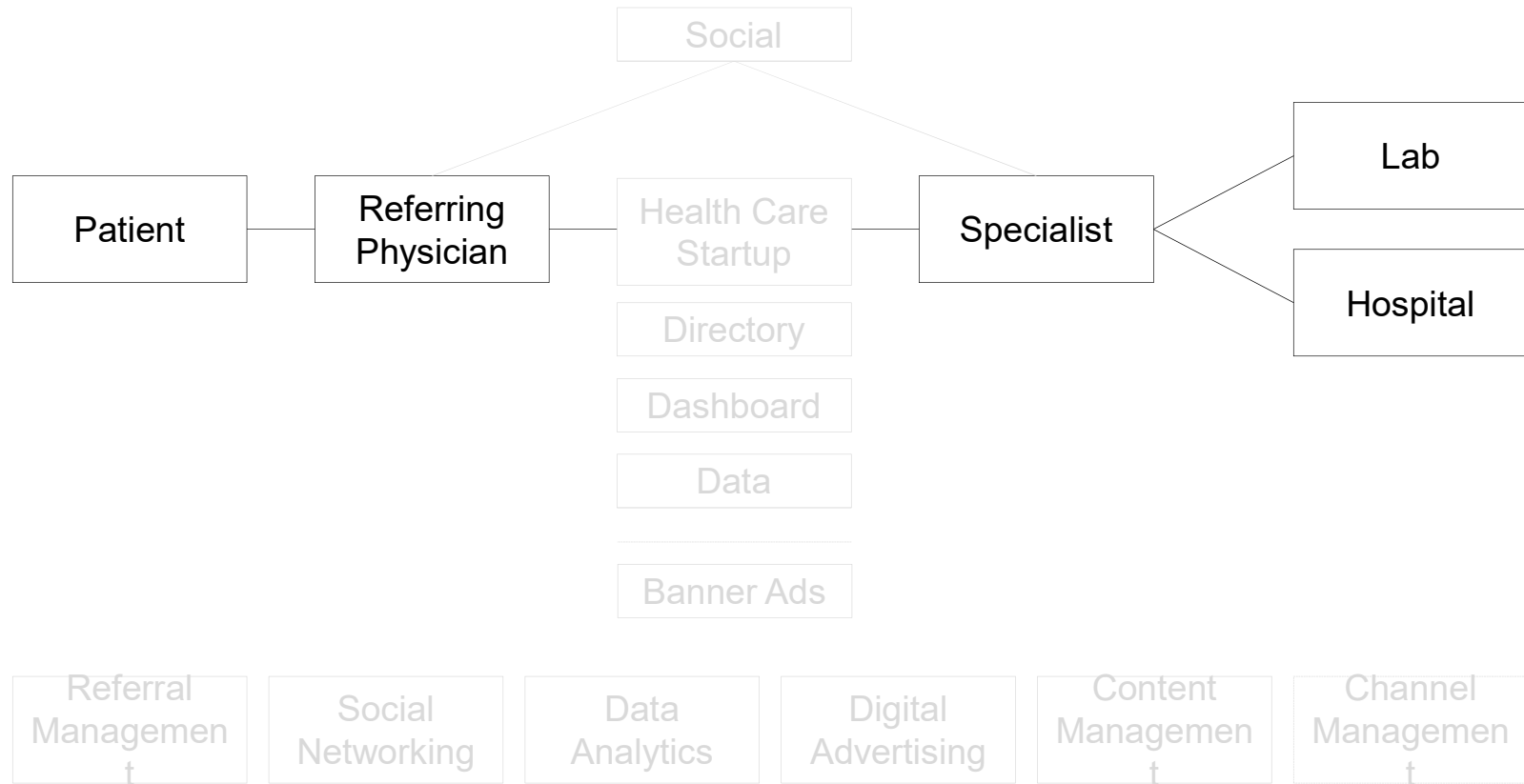
First, What Are The Potential Sides Of The Platform?	Second, What Type Of Business Does Each Side Represent?	Third, What Are The Category-Specific Design Considerations ?	Fourth, What Are Representative Competitive Dynamics?
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## To address request of prioritizing revenue opportunities, filtered business model through select Month 16 frameworks

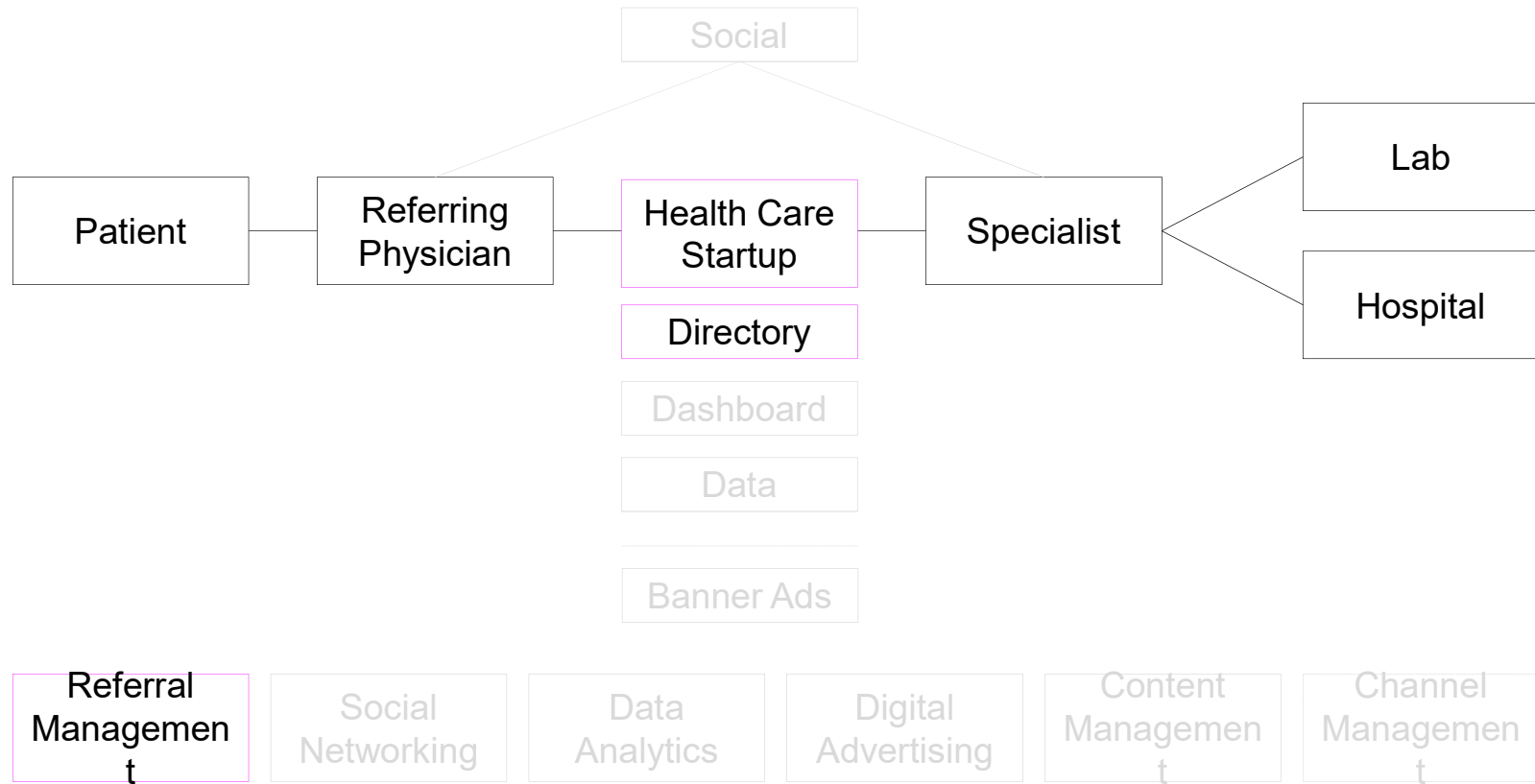
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\*Month 16's Viable Growth Solutions identifies jobs-to-be-done, how those jobs align to Vision and opportunity, how prioritized jobs illustrate the type of business opportunity (primary focus on product innovation, customer intimacy, or operational efficiency), how type of opportunity maps to potential differentiation, and how potential differentiation informs model design. Because of the nature of the current engagement did not allow for the initial steps, this presentation made assumptions about type of business.

# Market failure / white space: “leaky bucket” of information between referring physicians, specialists, labs, and hospitals



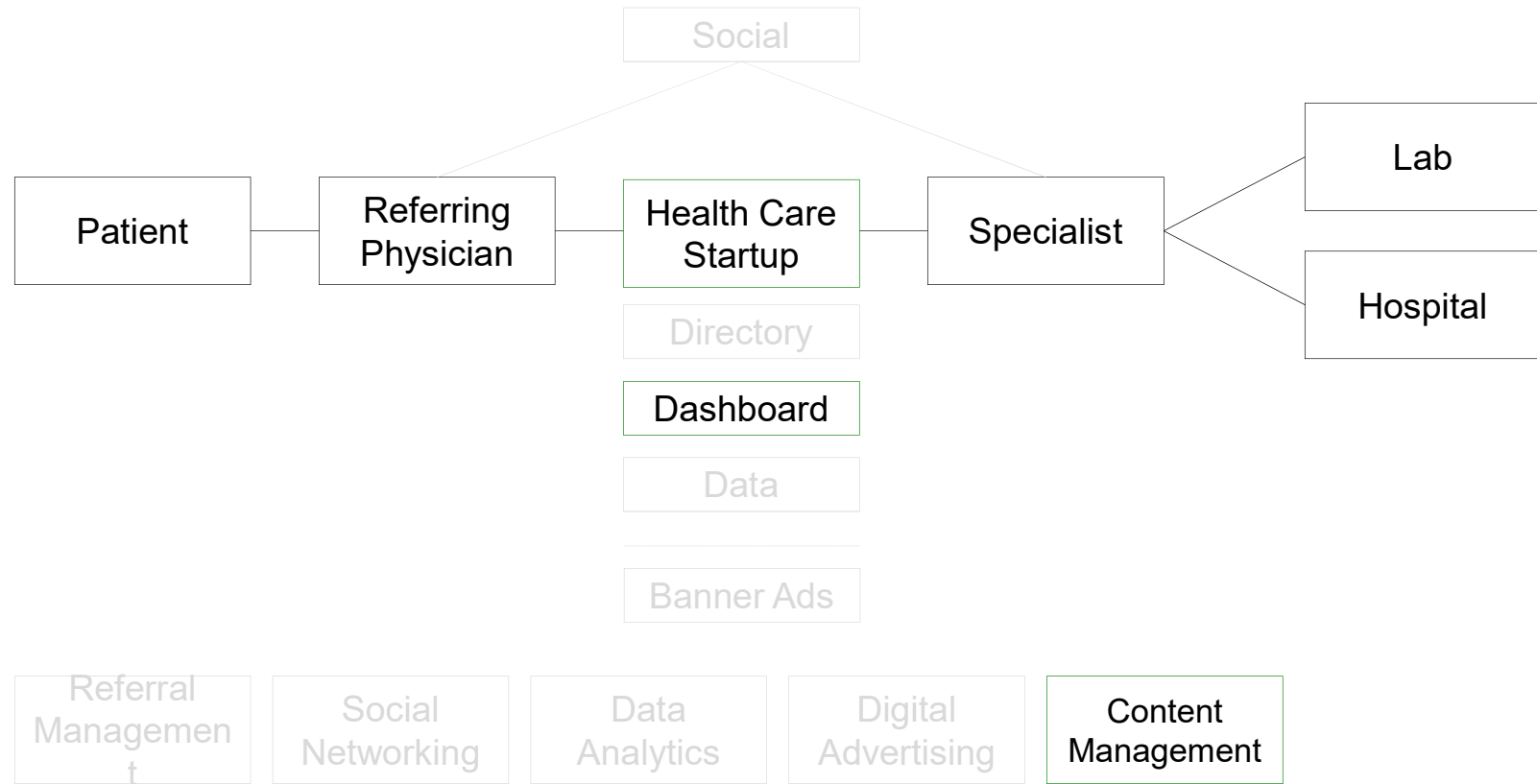
# Underlying business of provider directory (Referral Management) = operational efficiency + customer intimacy functionality



- Operational Efficiency Focus
- Product Innovation Focus
- Customer Intimacy Focus

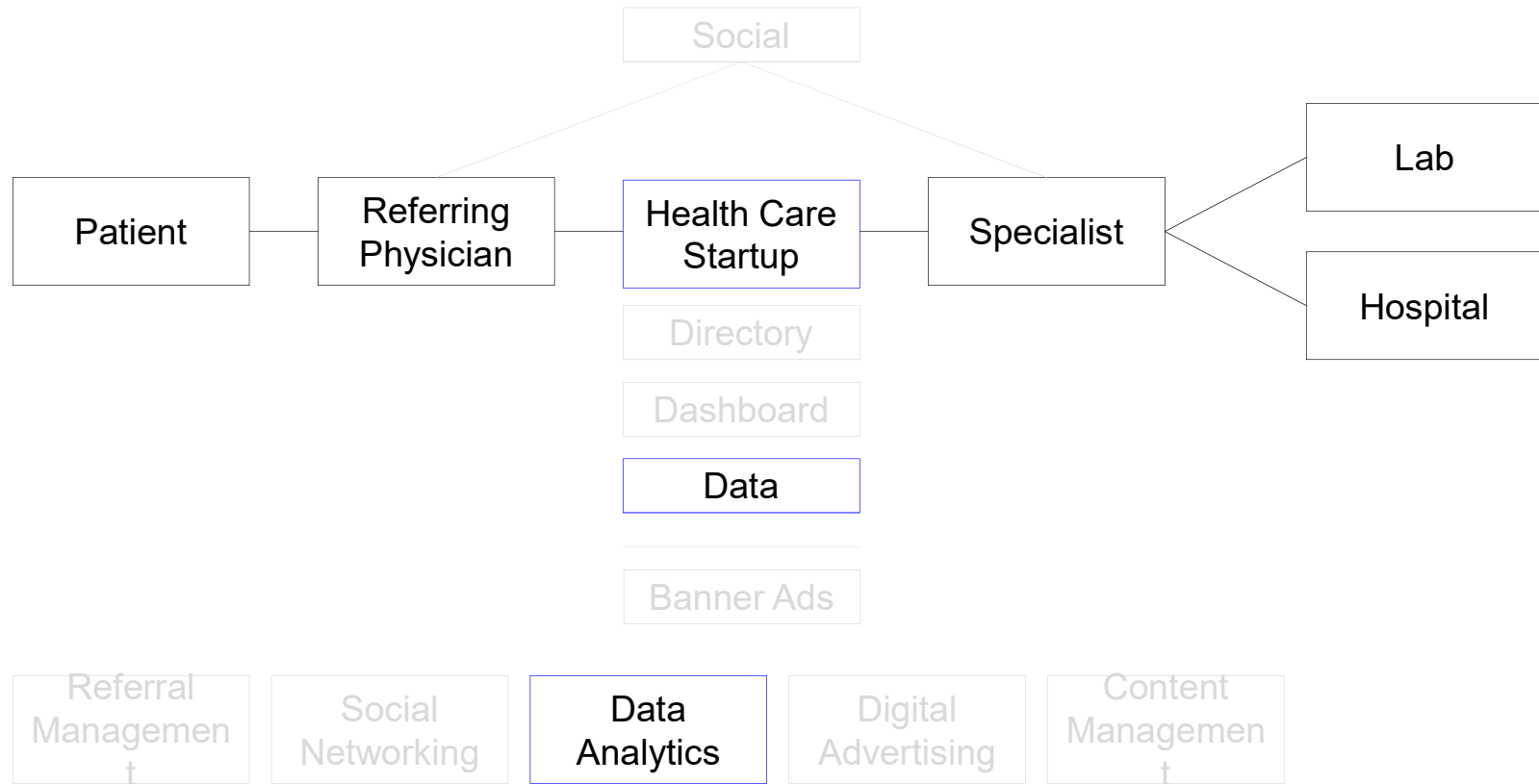


# Underlying business of Dashboard (Content Management) = customer intimacy functionality



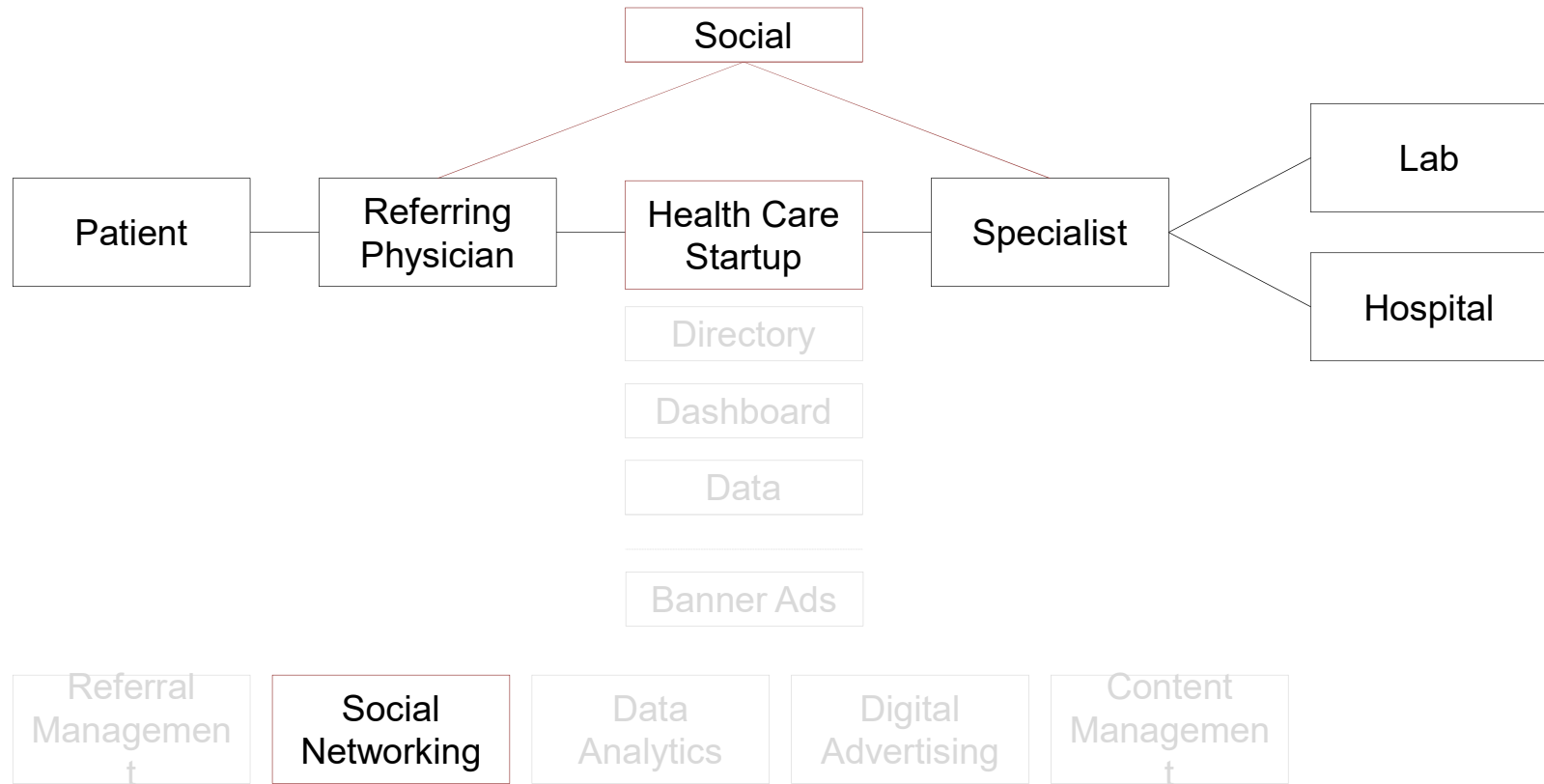
- Operational Efficiency Focus
- Product Innovation Focus
- Customer Intimacy Focus

# Underlying business of data minning for pharma companies / others (Data Analytics) = efficiency + intimacy functionality



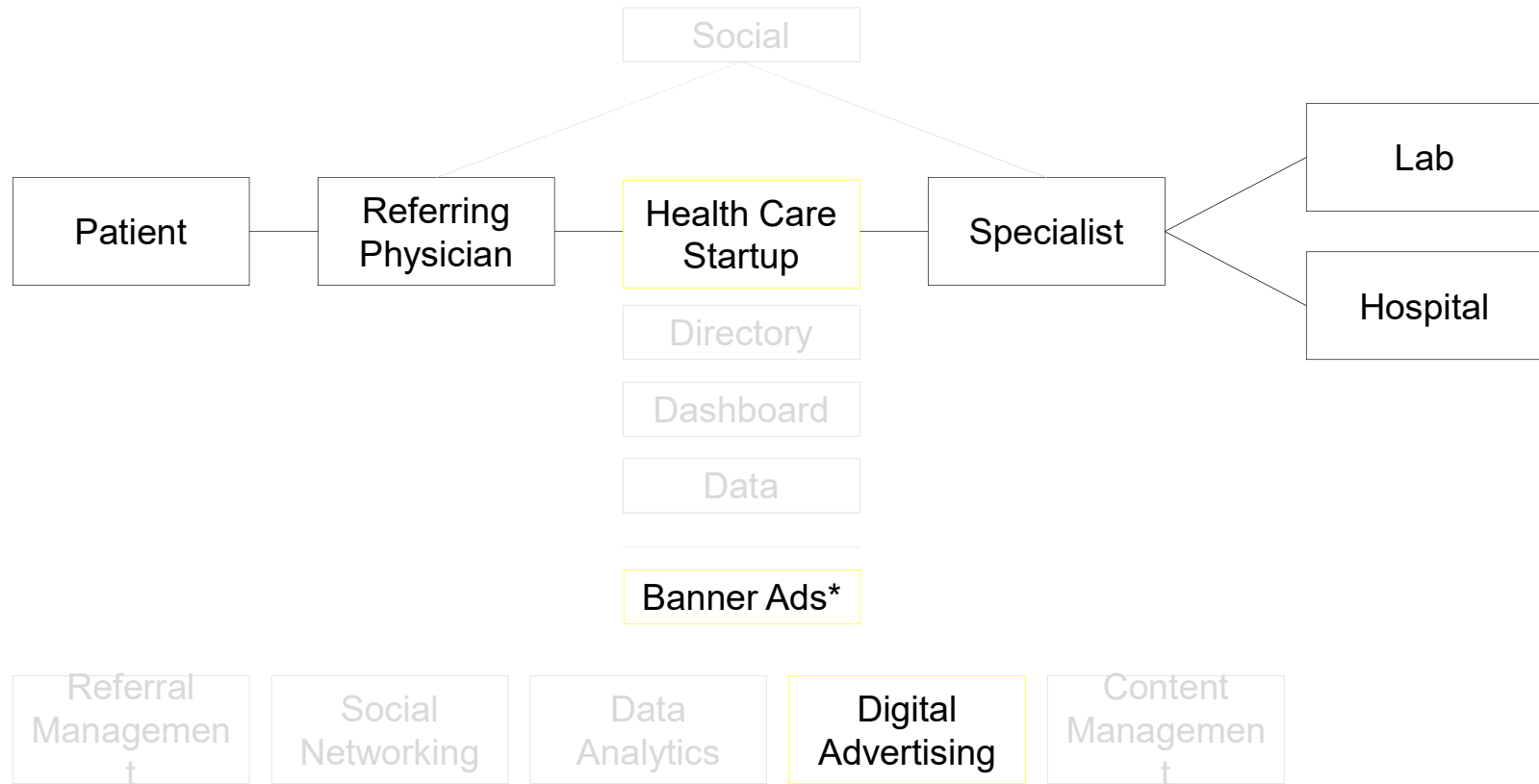
- Operational Efficiency Focus
- Product Innovation Focus
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# Underlying business of providers' social networks = product innovation and customer intimacy functionality



- Operational Efficiency Focus
- Product Innovation Focus
- Customer Intimacy Focus

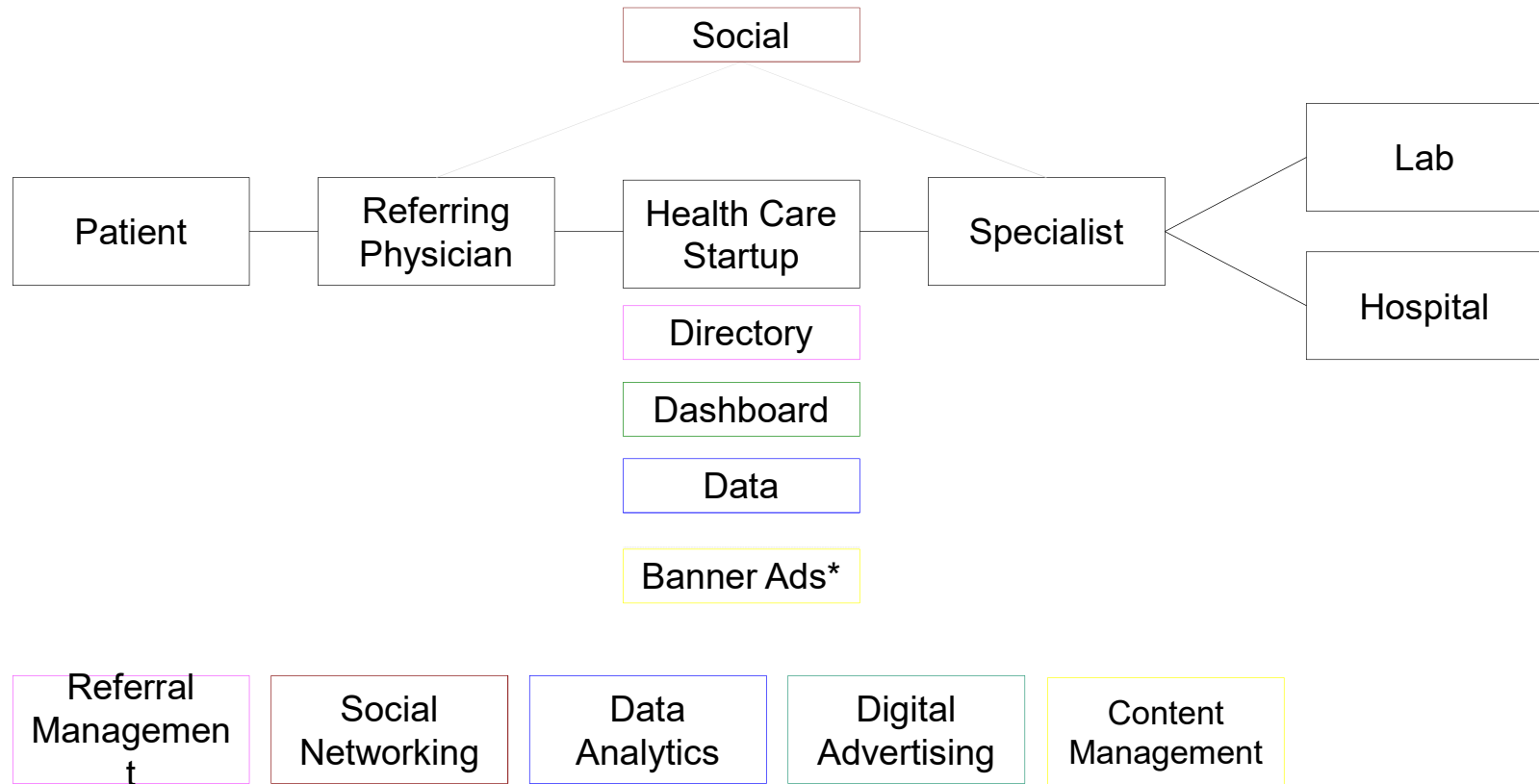
# Underling business of the banner ads = customer intimacy functionality



- Operational Efficiency Focus
- Product Innovation Focus
- Customer Intimacy Focus

\*Revenue but not product

Taken together, envisioned sides of platform represent = complex array of functions that must be sequenced to be manageable



\*Revenue but not product

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1. Will side of platform increase network effects via better price, quality, and convenience?
2. Will side of platform increase / diversify revenue or be subsidized?
3. Will side create divergent motivations?
4. Will side stifle innovation by creating lowest common denominator relative to other sides?
5. Will today's revenue-leading side be tomorrow's revenue generator?
6. Does pricing consider side's sensitivity, which side (s) benefit the most, and possible "negative network effects" (e.g., more information = overload, more providers = possibly lower quality and diminished loyalty)
7. Can the "chicken-and-egg" conundrum be addressed by giving users opportunities to improve the initial offering, engage socially, realize pre-scale value?
8. What is the plan for offering something that is "good enough" to gain traction, the plan to go from parity to value-add, and the plan to go from value-add to something defensible (e.g., capital-intensive barriers-to-entry, high switching costs)
9. How can rules be employed to make appropriate tradeoffs between quality and quantity?
10. Could high quantity drive down quality?
11. Does help people make decisions (e.g., quality assurance, pricing, rules)?

To address request of prioritizing revenue opportunities, filtered business through select Month 16 frameworks

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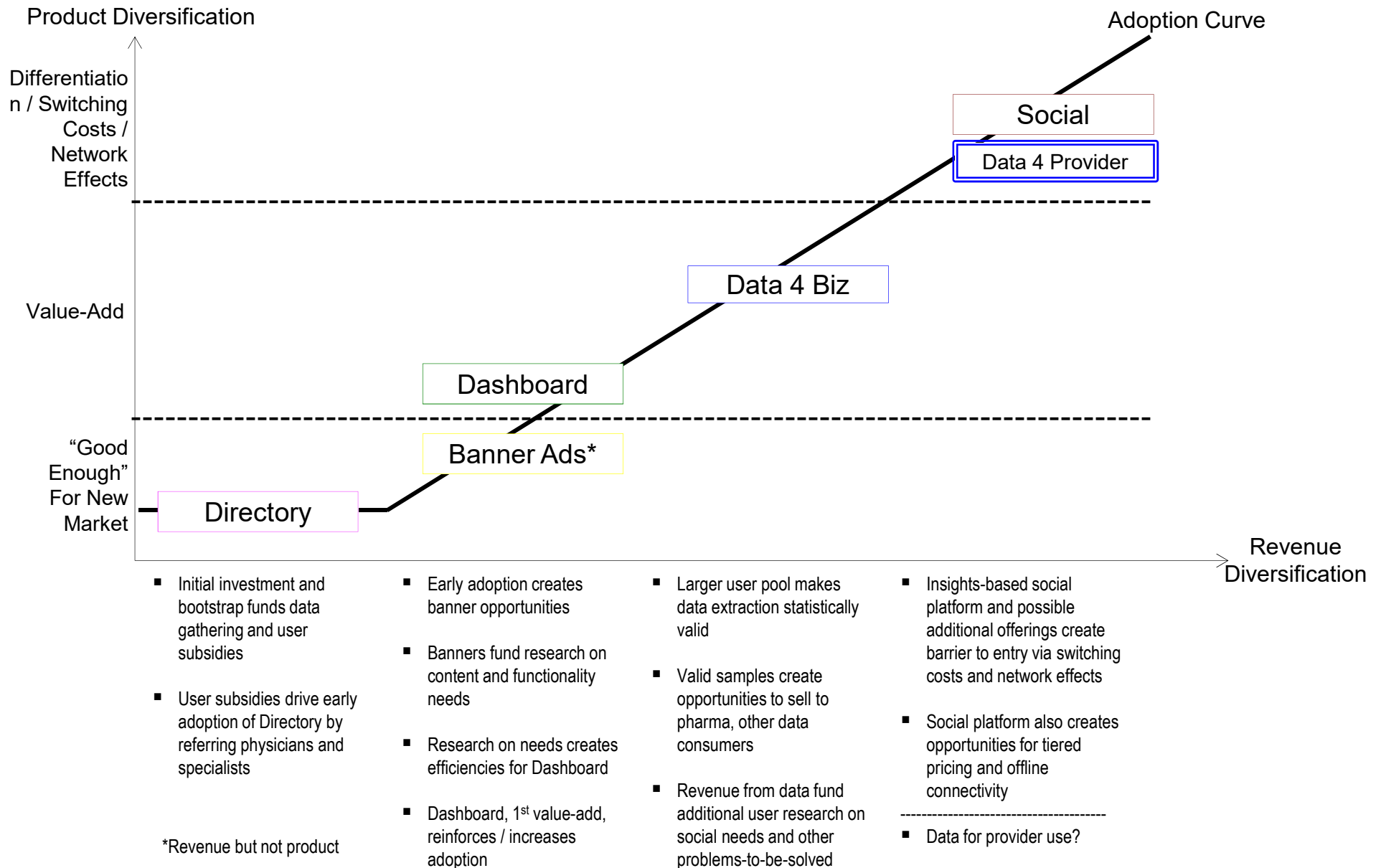
## Though size of market, funding, # brands, niche focus illustrate race for U.S. differentiation, there are lessons for Health Care Startup



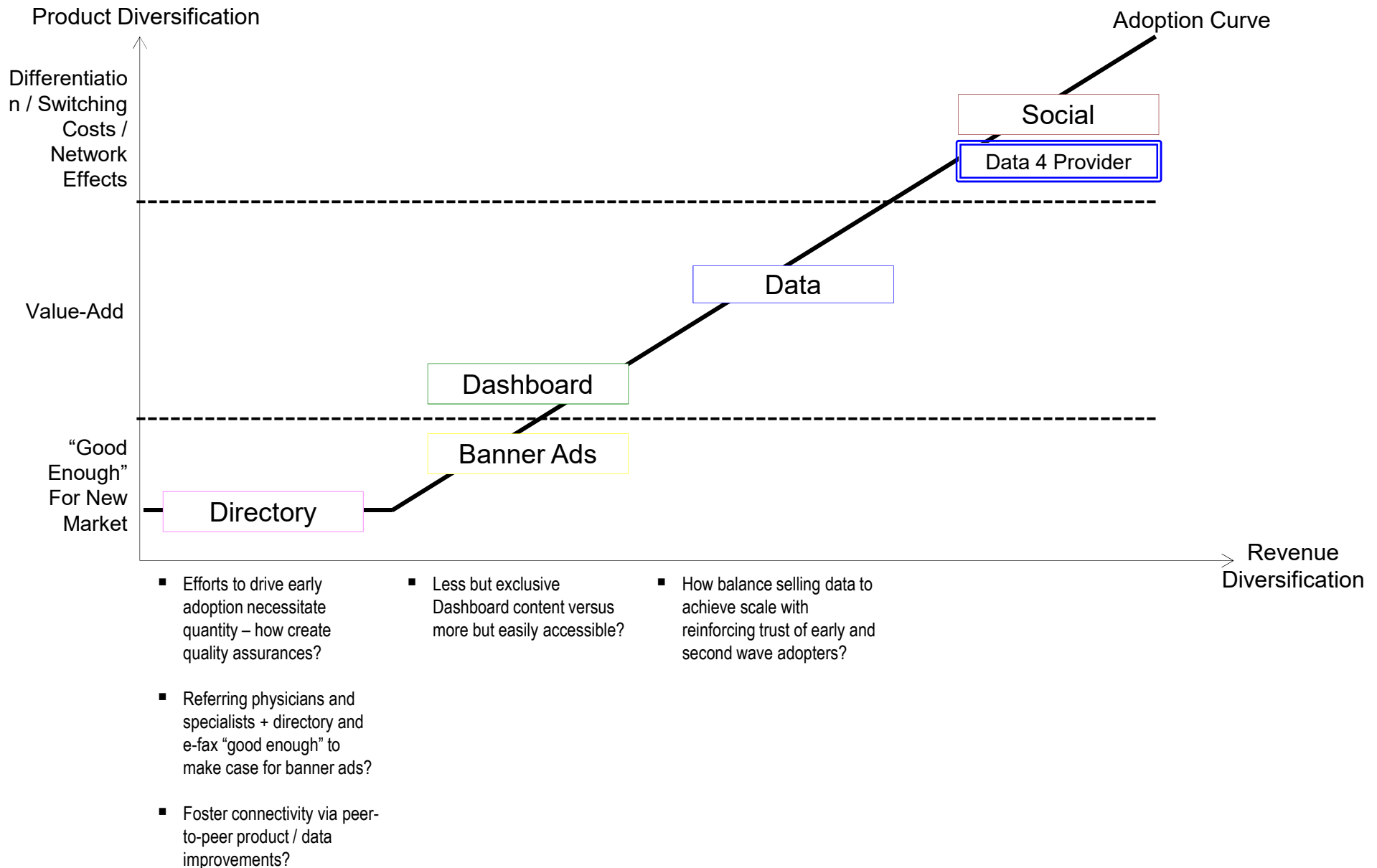
1. Brands show that “Just” connecting providers is parity, connecting them in functionally beneficial ways (more efficient) and emotionally efficient ways (e.g., network with your peers) are points of difference
2. With interoperability solved for, speed and value-add functions (e.g., better faxing, tracking) come into play for brands
3. Peer-to-peer referrals (two-sided platform) are brands’ table stakes, including other stakeholders (e.g., insurance [which might not be relevant here]) helps drive differentiation
4. Multiple sides might necessitate segmented messaging; for example, brands’ “big data” functions a benefit for integrated healthcare provider but not small practice
5. Who wins? Brands’ ubiquitous financial proposition (e.g., greater efficiencies) spot-on for U.S. market and Health Care Startup’s data consumers but not necessarily Health Care Startups’ providers
6. Brands’ assumed needs for leading edge technology – win with more – might create white space for getting basics right, building from there
7. Ironical for a highly fragmented \$1 trillion market, but some brands have “holistic” view (e.g., value creation after a referral)

### **3. Possible Sequencing**

# White space + multi-sided plans + types of businesses + strategic considerations = possible staged revenue / product approach

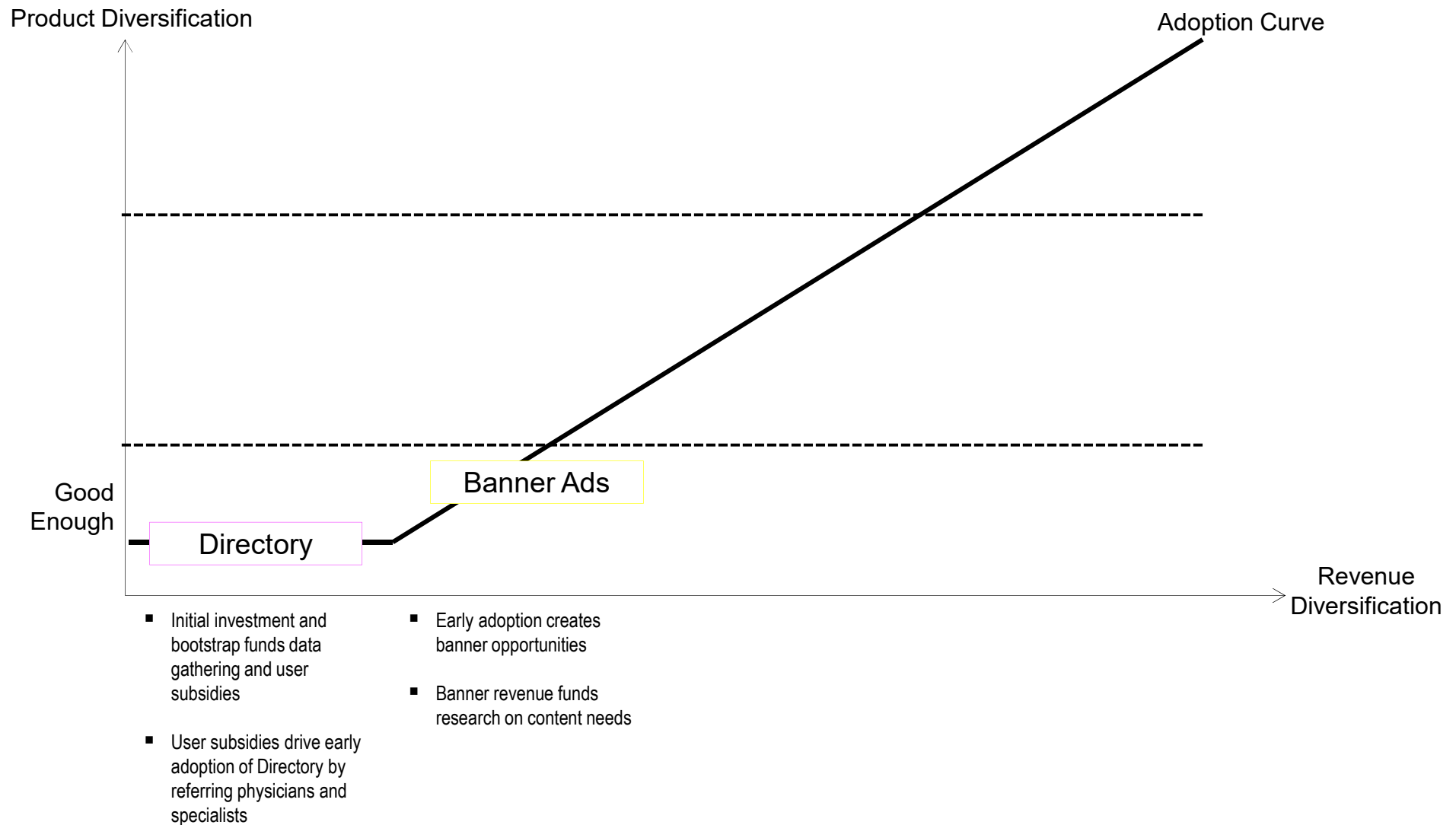


# Types of businesses + category design considerations + competitive threats = additional dynamics to consider

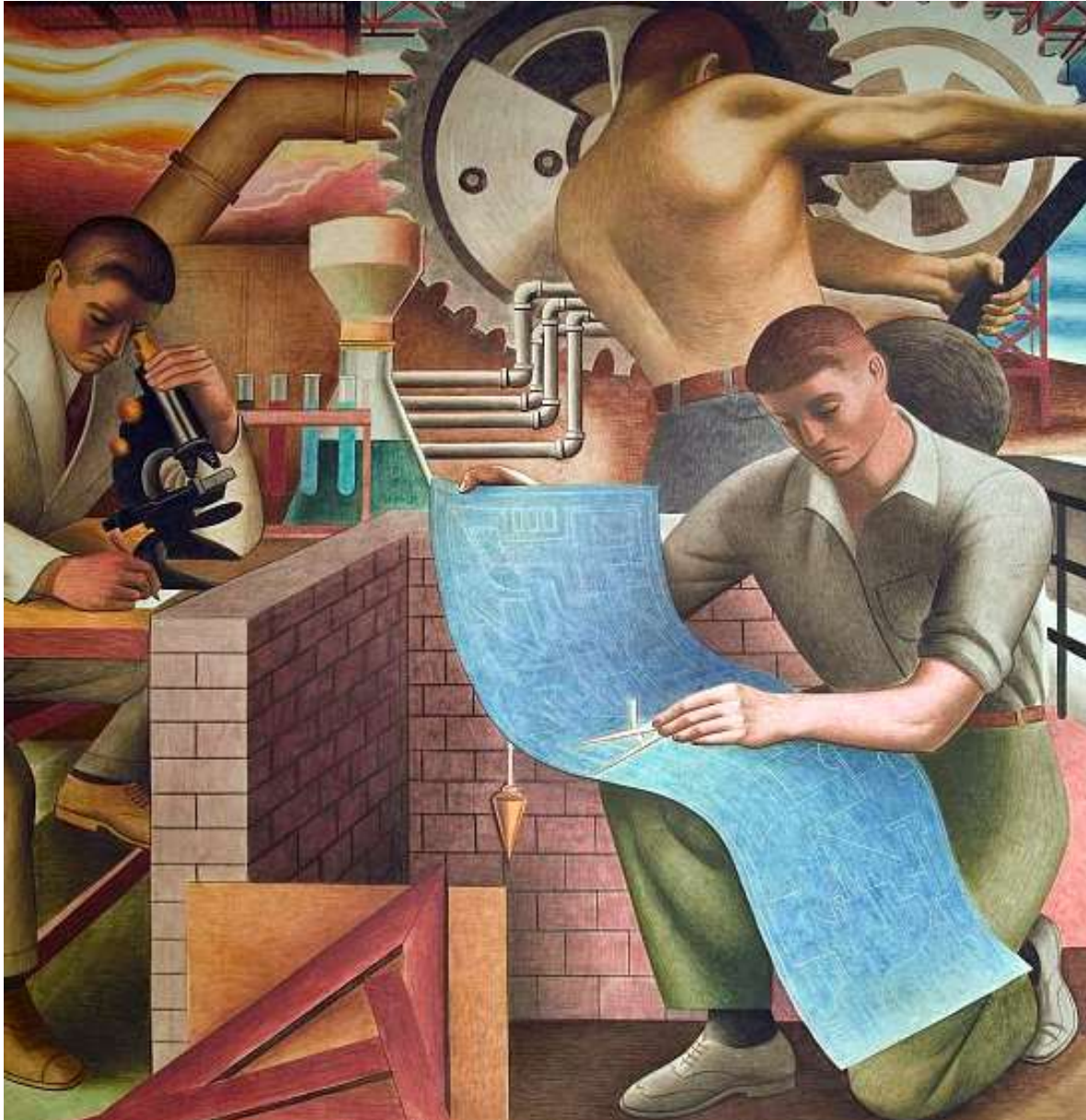


## **5. Next Steps**

General feedback + specific feedback on sequencing = deeper dive on “good enough” phase OR fresh eyes on situation



**Thanks for your time.**



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**Month16**  
do good