THE "DATA OWNERSHIP" MODEL

The customer can download the free version of the app, which will allow them to input demographic, genetic history, and medical condition information. They can also permit the app to pull in other health tracking information from external apps. The app will then create a living comprehensive health data report than can be stored or printed to take to their physician.

The customer can upgrade to the paid version of the app. This payment will go to NuCare and will be used to subsidize the customer's free first-time consultation with their chosen primary physician. This physician can read their health report and work with them to create a detailed careplan. The premium version also allows them to see their calculated current health score and future health projections.

From then on, the customer can interact with their physician (or any other specialist that can later be incorporated into the app) by paying a copay designated by each physician. A portion of that copay goes to NuCare.

KEY PARTNERS

Customers (co-creation of careplan)

Internet service providers

Pharmacies

Insurance companies

Payment processing partner

- - - - - - - - - - PREMIUM - - - - - - - - - -

Medical professionals

    Physicians

    On-call nurses

KEY ACTIVITIES

Compatibility assessment with external health applications

Software development and marketing

    Information security/Data sharing

- - - - - - - - - - PREMIUM - - - - - - - - - -

    Health status/projection algorithms

    Video chat/messaging

Relationship management with medical professionals

KEY RESOURCES

Servers

App/Website

- - - - - - - - - - PREMIUM - - - - - - - - - -

Algorithms IP

Medical professionals

    Physicians

    On-call nurses

VALUE PROPOSITIONS

Ownership of centralized health data and sharing capability

- - - - - - - - - - PREMIUM - - - - - - - - - -

Personalized immediate medical attention with most types of doctors (including your own primary physician)

Centralized careplan and health history among all your health workers

Taking part in creating and managing your own careplan

Insights into current and future health

Avoiding expensive copay at traditional PCP

"Data ownership freemium version"

CUSTOMER RELATIONSHIP

Automated services (report delivery, data sharing, educational material, etc.)

IT Help

- - - - - - - - - - PREMIUM - - - - - - - - - -

Dedicated personal assistance (immediate consultation)

Co-creation (building careplan)

CHANNELS

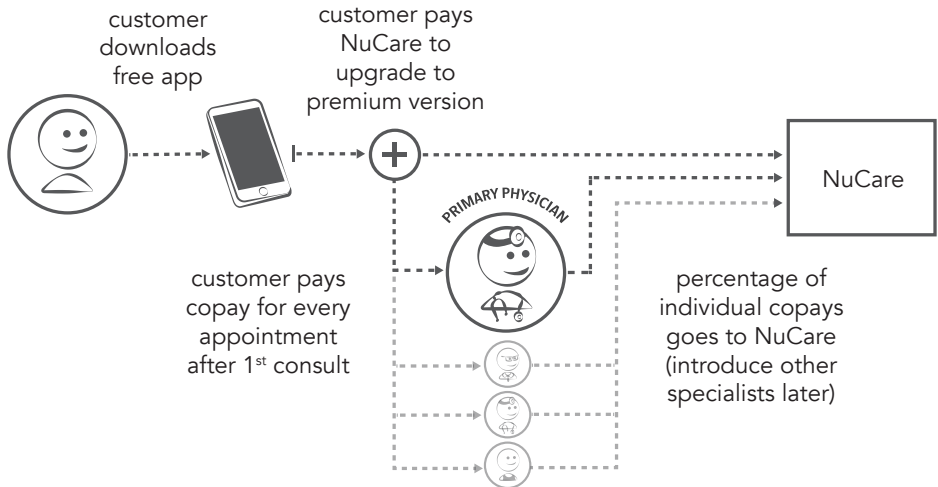App (own)

Website (own)

CUSTOMER SEGMENTS

Wealthy, health-conscious people with smart phones *[Early Adopters]*

Middle class people with high-deductible insurance and smart phones *[Early Adopters]*

Poor people on Medicaid/Medicare that have access to the internet

COST STRUCTURE

Marketing/Acquisition costs

Server/cloud costs

Design, testing, and engineering costs (web & app)

Maintenance costs (web & app)

IT Help staff payment

REVENUE STREAMS

App purchase revenue

- - - - - - PREMIUM - - - - - -

Copay revenue from independent physicians

customer downloads free app

customer pays NuCare to upgrade to premium version

customer pays copay for every appointment after 1st consult

PRIMARY PHYSICIAN

NuCare

percentage of individual copays goes to NuCare (introduce other specialists later)

THE "NUWELL" MODEL

After experiencing the intro and setting up their account in the app, customers get to choose a primary physician to have a first-time appointment with and co-create their own careplan. After that, they can pay copays to regularly interact with their physician (or that physician's on-call nurses). By having a personally assigned physician over time, customers waste less time re-introducing themselves to a new physician and receive better long-term care. This physician also inputs the necessary information to create the future health projections, and can use them to work with the customer towards securing a healthier future.

Customers can also interact with any other specialist available in the app, at which point those physicians will propose careplan additions. Customers can choose to share those results with their primary physician to update their careplan together. A portion of the physician co-payments goes to NuCare.

Customers can sync any compatible external health trackers/data to their account, and choose to give read/write permissions to any physician they interact with.

KEY PARTNERS

Customers (co-creation of careplan)

Medical professionals

    Physicians

    On-call nurses

Internet service providers

Pharmacies

Insurance companies

Payment processing partner

KEY ACTIVITIES

Software development and marketing

    Health status/projection algorithms

    Video chat/messaging

    Information security/Data sharing

Relationship management with medical professionals

Compatibility assessment with external health applications

KEY RESOURCES

Servers

Algorithms IP

App/Website

Medical professionals

    Physicians

    On-call nurses

VALUE PROPOSITIONS

Personalized immediate medical attention with most types of doctors (including your own primary physician)

Centralized careplan and health history among all your health workers

Taking part in creating and managing your own careplan

Insights into current and future health

Avoiding expensive copay at traditional PCP

"Open-API Amwell with a co-created careplan"

CUSTOMER RELATIONSHIP

Dedicated personal assistance (immediate consultation)

Co-creation (building careplan)

Automated services (report delivery, data sharing, educational material, etc.)

IT Help

CHANNELS

App (own)

Website (own)

CUSTOMER SEGMENTS

Wealthy, health-conscious people with smart phones *[Early Adopters]*

Middle class people with high-deductible insurance and smart phones

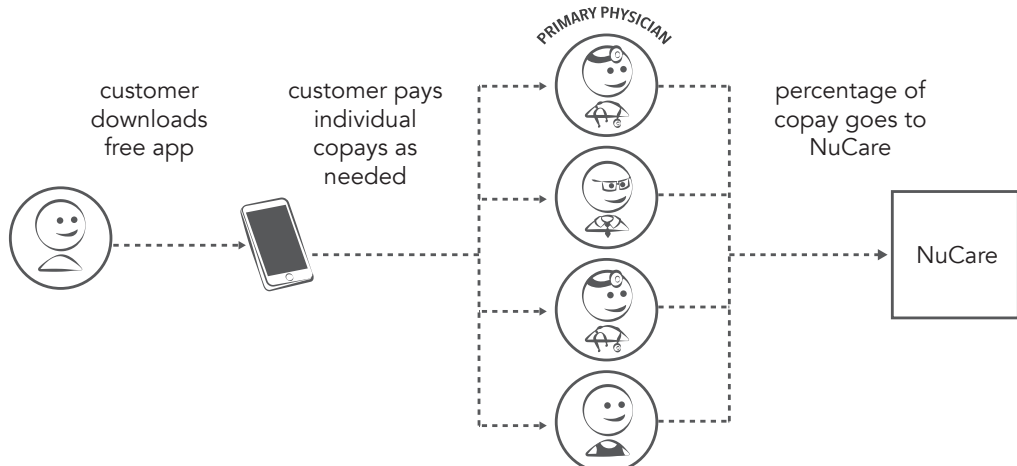Poor people on Medicaid/Medicare that have access to the internet

COST STRUCTURE
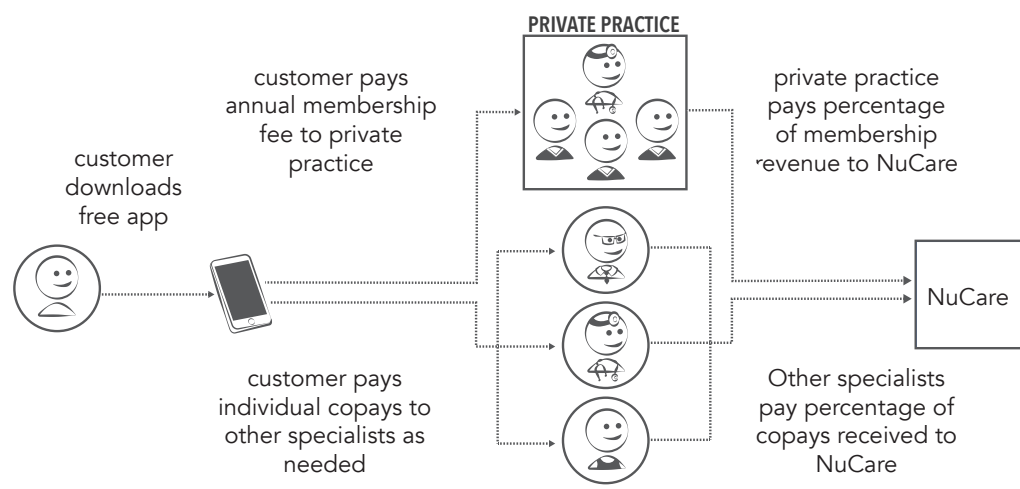
Marketing/Acquisition costs

Server/cloud costs

Design, testing, and engineering costs (web & app)

Maintenance costs (web & app)

IT Help staff payment

REVENUE STREAMS

Copay revenue from independent physicians

customer downloads free app — customer pays individual copays as needed — PRIMARY PHYSICIAN — percentage of copay goes to NuCare — NuCare

THE "HYBRID" MODEL

The customer pays an annual membership fee to their chosen concierge physician. That fee grants them access to the full version of the NuCare app and free interaction (and F2F appointment scheduling) with their primary concierge physician. The concierge practice pays a portion of their membership revenue to NuCare for use of the software.

The customer can also choose to pay a co-payment to interact with other available specialists within the app. They can choose to allow these physicians to read and/or write their health information, and share their reports with their primary concierge physician. A portion of the specialists' received co-payments goes to NuCare for use of the software.

This model should start small with one private practice and their existing patients. With time, more practices and other specialists can then be incorporated into the system, and then eventually entire medical institutions.

(This model involves implementing the app with existing practices' systems, rather than just providing the service to independent physicians.)

KEY PARTNERS

Customers (co-creation of careplan)

Medical professionals

  Physicians

  On-call nurses

Medical institutions (TBD)

Internet service providers

Pharmacies

Insurance companies

Payment processing partner

KEY ACTIVITIES

Software development and marketing

  Health status/projection algorithms

  Video chat/messaging

  Information security/Data sharing

Relationship management with medical professionals

Compatibility assessment with external health applications

KEY RESOURCES

Servers

Algorithms IP

App/Website

Medical professionals

  Physicians

  On-call nurses

VALUE PROPOSITIONS

Personalized immediate medical attention with most types of doctors (including your own primary physician)

Centralized careplan and health history among all your health workers

Taking part in creating and managing your own careplan

Insights into current and future health

Avoiding expensive copay at traditional PCP

"Amwell meets concierge medicine"

CUSTOMER RELATIONSHIP

Dedicated personal assistance (immediate consultation)

Co-creation (building careplan)

Automated services (report delivery, data sharing, educational material, etc.)

IT Help

CHANNELS

App (own)

Website (own)

In-person physicians (partner)

CUSTOMER SEGMENTS

Wealthy, health-conscious people with smart phones *[Early Adopters]*

Middle class people with high-deductible insurance and smart phones

Poor people on Medicaid/Medicare that have access to the internet

COST STRUCTURE

Marketing/Acquisition costs

Server/cloud costs

Design, testing, and engineering costs (web & app)

Maintenance costs (web & app)

IT Help staff payment

REVENUE STREAMS

Membership revenue from private practices or institutions for remote and physical service

Copay revenue from independent specialists for remote service

customer downloads free app

customer pays annual membership fee to private practice

PRIVATE PRACTICE

private practice pays percentage of membership revenue to NuCare

customer pays individual copays to other specialists as needed

NuCare

Other specialists pay percentage of copays received to NuCare