



IDC MarketScape

IDC MarketScape: U.S. Population Health Management 2016 Vendor Assessment

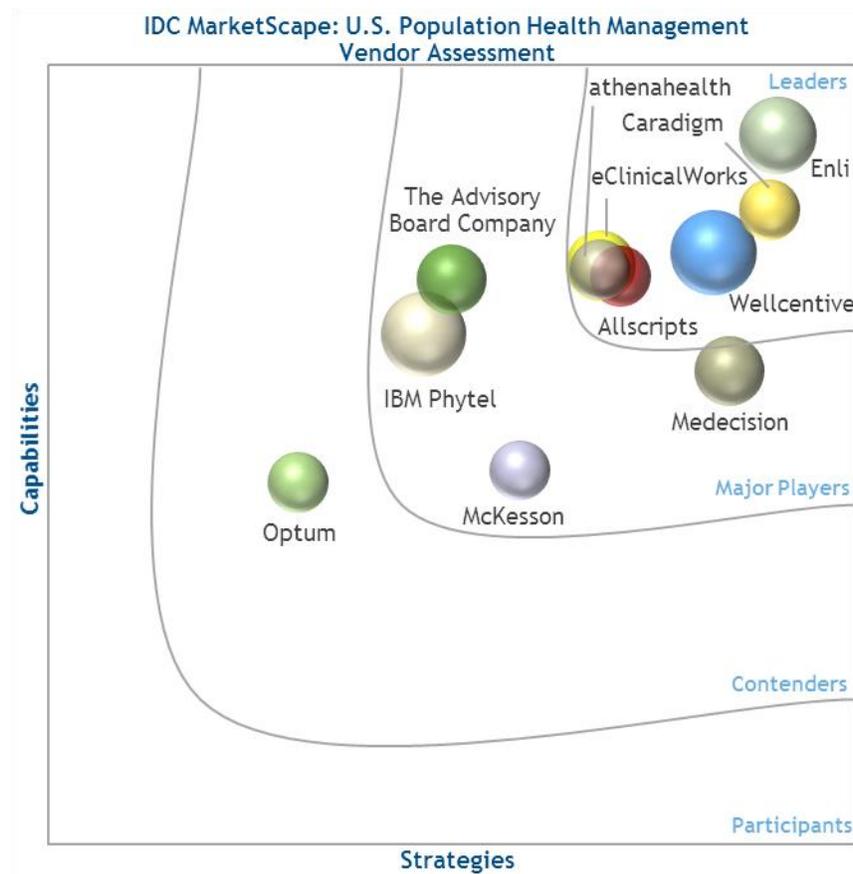
Cynthia Burghard

THIS IDC MARKETSCAPE EXCERPT FEATURES: ENLI

IDC MARKETSCAPE FIGURE

FIGURE 1

IDC MarketScape U.S. Population Health Management Vendor Assessment



Source: IDC, 2016

Please see the Appendix for detailed methodology, market definition, and scoring criteria.

IN THIS EXCERPT

The content for this excerpt was taken directly from IDC MarketScape: U.S. Population Health Management 2016 Vendor Assessment (Doc #US41689516). All or parts of the following sections are included in this excerpt: IDC Opinion, IDC MarketScape Vendor Inclusion Criteria, Essential Guidance, Vendor Summary Profile, Appendix and Learn More. Also included is Figure 1.

IDC OPINION

Market dynamics have driven the emergence of the population health management market. As the buzzword du jour, population health management is defined differently depending on with whom you are speaking. One of the drivers to create an IDC MarketScape for U.S. population health management is to establish a common definition and vendor inclusion criteria to provide clarity to healthcare executives before investing in technology. Key findings of this IDC MarketScape include:

- Population health management as defined by IDC Health Insights includes functionality to identify populations at risk or predicted to be at future risk as well as provider performance measurement, the ability to create and monitor care plans and, finally, the ability to communicate with communities of patients as well as with individual patients.
- Physician group practices initially represented the majority of clients in the population health management market; recently, integrated delivery systems are more active in population health management as they are taking a strategic approach, while physician groups are more tactical in their approach.
- Differentiators include the depth and breadth of analytic capability (patient risk identification and performance measurement), the degree of integration with electronic health records (EHRs), and the sophistication of care plan development. The ability to have data-driven but configurable care paths is an efficient way to begin the care planning process. Patient engagement is moving toward a more proactive approach by pushing communications to patients rather than requiring them to go to a portal.
- The number of leaders doubled since 2014 with EMR vendors comprising one half of the leaders. There appears to be commoditization occurring in the market as we see clusters of vendors, meaning there is limited differentiation.
- The market dynamics are changing as new entrants are actively competing and winning business. We are seeing an increased number of disease-specific population health management applications for patients with chronic illnesses.
- There is an increased demand and supply of consultants both within the vendors profiled in this study and from other third parties such as Evolent and Lumeris. Providers need a wide variety of services, including advice on governance, financial and clinical risk calculation, intervention strategies, and analytic support.

IDC MARKETSCAPE VENDOR INCLUSION CRITERIA

IDC Health Insights' analysts did a comprehensive review of vendors claiming to have a population health management solution. At HIMSS 2016, population health management was popular signage. The types of vendors that identified with population health management included electronic health records vendors, core provider health information systems vendors, and analytics vendors. While

many of these vendors had some capability to enable population health, they did not meet IDC Health Insights' vendor inclusion criteria, which include:

- Functionality that includes analytics to identify and stratify patients and present performance measurement data to providers as well as workflow to develop interventions at the patient and campaign level and tools to engage patients in their care plans and progress toward goals.
- Referenceable clients that are using all the functionality defined in the first bullet either on a single platform or through integration. A number of vendors had the functionality within their product assets, but it was not being used together to enable patient health management. We call these "vendors to watch" (see the Vendors to Watch section in the Appendix).
- Technology must be installed in healthcare providers, either hospital or physician group practice. A number of vendors are selling their population health management assets to payers that are in turn providing the capability to their providers.

Vendors included in this IDC MarketScape are:

- Allscripts
- athenahealth
- Caradigm
- eClinicalWorks
- Enli (formerly Kryptiq)
- IBM Phytel
- McKesson
- Meddecision
- Optum
- The Advisory Board Company
- Wellcentive

ESSENTIAL BUYER GUIDANCE

The population health management market is among the most confusing to buyers. Because of its du jour nature, virtually all vendors are interested in being recognized as providing technology to enable population health management. This document not only defines the market but identifies 11 vendors that are actively supporting this market. While other vendors may support some of the population health management requirements, they do not provide the full functionality. It is critical that buyers articulate their business goals and evaluate their ability to manage change inevitable with the transition to value-based care before they select a vendor. Vendors in this IDC MarketScape have strengths in different aspects of population health, and it is critical for buyers to align themselves with the vendors that will meet their requirements. Other guidance for buyers include:

- **Clearly articulate, quantify, and document your organization's business goals and assess the organization's ability to take on population health.** These two exercises will provide the criteria with which you select your vendor. For example, an organization that is new to population health will need consulting support to help create the processes, people, and other resources required to enable population health. In this case, the organization will want to select a vendor that has a full breadth of resources to support the transition.

- **Remember that a vendor's strength is typically in its heritage and understand how the vendor developed its capability.** For example: Did the vendor natively develop the population health capability? If so, how did it obtain the required knowledge? Did it buy an asset that is the cornerstone of its offering? Is it partnering with other vendors for certain capabilities? It is imperative to understand whether a vendor is "making do" with existing technology or have actually developed software to meet market needs.
- **Keep in mind that the decision on a vendor is as much a business decision as an IT decision.** Increasingly, IT procurement decisions and funding are coming from the line of business. This trend is expected to continue.
- **Population health management combines payer and provider domain expertise; make sure your vendor has both capabilities.** Most vendors in the population health market have brought together both payer and provider resources to support product development and consulting.
- **The demands of population health are ever changing at a rapid pace; be sure your vendor has the agility and flexibility to keep up with new requirements.** While still a nascent market, healthcare organizations are learning what interventions are effective and as such are coming up the learning curve. Keep in mind that CMS's goal of 50% of payments by 2018 will include some component of risk and as such will require improved outcomes for population health management.

VENDOR SUMMARY PROFILES

This section briefly explains IDC's key observations resulting in a vendor's position in the IDC MarketScape. While every vendor is evaluated against each of the criteria outlined in the Appendix, the description in the sections that follow provides a summary of each vendor's strengths and challenges.

Enli (Formerly Kryptiq)

Enli Health Intelligence (formerly Kryptiq) is a privately held company based in Beaverton, Oregon (for more details, see www.enli.net). Founded in 2001, the company was purchased by Surescripts in 2012. Kryptiq spun off from Surescripts in 2015 and rebranded as Enli Health Intelligence.

Enli's core product offering is CareManager, which integrates healthcare data with evidence-based guidelines, embedding them in a visual, heads-up display within provider workflows across the enterprise and at the point of care.

The core components of the Enli CareManager solution include:

- **CareManager Analytics** comingles clinical and financial data with socioeconomic and well-being data to identify priority cohorts and predict the economic value of early intervention.
- **CareManager Central Worklist** is a cloud-based care team tasking engine that consistently applies care management protocols to defined populations, continuously informs the team of progress toward plan objectives, and optimizes program resources.
- **CareManager Point-of-Care** is a clinical decision-support tool, rendered as a dashboard in the EMR, enabling healthcare providers to make treatment decisions informed by evidence-based medical guidelines.

During the 2015-2016 period, Enli had several sentinel events, including hiring additional clinicians, including a new chief medical officer who, prior to joining Enli, served as the president of Providence

Medical Group. Also during 2015, Enli developed a consulting practice to assist providers optimize CareManager as well as support providers with analytics, program design, and organizational design associated with team-based care delivery.

Enli was among the first vendors to bring to market an application that supports the workflow, processes, and billing for CMS' Chronic Care Management programs. Codevelopment efforts with customers pursuing alternative payment models such as Medicare share savings (MSSP) and Comprehensive Primary Care Initiative (CPCI) and Medicaid's Delivery System Reform Incentive Payment (DSRIP) system enabled Enli to greatly enhance and expand CareManagers' ability to ingest multiple sources of data and provide advanced clinical analytics.

Since 2014 Enli has migrated and developed a large portion of its portfolio in the cloud. Complete migration of CareManager to the cloud will be completed by year-end 2016. Also on the road map for the first half of 2017 is the Enli Common Care Plan – a cloud version of its UX – which makes gaps in care visible to all members of a clinically integrated network.

Enli's CareManager is the commercial version of the product originally developed by providers at Providence Health & Services in Portland, Oregon. Since acquiring the tool in 2008, Enli has codeveloped each release with leading healthcare organizations and curated its clinical guidelines in collaboration with its customer advisory group. Enli CareManager is one of the few population health management applications with bidirectional EMR integration.

Enli's ability to embed the company's applications inside EMR's is due in large part to its technical legacy. It was among the early developers of secure clinical messaging, automated messaging, eprescribing, and document management. Enli's OEM technologies are now owned, developed, and distributed by Surescripts to its network of more than 400,000 providers nationwide.

In early July 2016, Enli Health Intelligence and Dell Services announced the formation of a strategic global relationship. Together, the companies offer U.S. and international healthcare providers, including physician practices, accountable care organizations, and health systems, end-to-end technology and advisory services to accelerate their quality improvement and value-based care delivery initiatives.

Enli is a Leader in this IDC MarketScape for population health management.

Strengths

With the spin off from Surescripts, Enli has focused exclusively on the population health market. While Enli lost the financial resources available from its parent, Surescripts is an investor in Enli and holds a seat on its board. Enli, using its clinical process management tools, was able to rapidly build its CMS Chronic Care Management technology that automates CMS' requirements.

Expanding its clinical staff and resources has earned Enli increased credibility in the market. Population health management is very new to physicians who are used to looking at patients one at a time for current symptoms. Enli's expansion of its consulting capabilities allows providers to get more value from Enli technology. Enli has among the largest client base in the population health market, and CareManager, now in its fourth generation, is among the most mature products in the population health management market. Enli has deep domain knowledge in provider workflow and patient engagement. The company invests heavily (> 30% of revenue) in research and development. Enli clients cite the responsiveness of Enli personnel at all levels of the organization and Enli's true

partnership approach as key differentiators. Enli's innovation was among the praises heard from its clients.

Among the company's market differentiators is Enli's ability to bidirectionally integrate with EMRs; clients are able to present data at the point of care to support clinical decision making and close gaps in care. IDC Health Insights believes that integration at the point of care delivers more effective care management; to be sustainable, accountable care programs must take advantage of every encounter with a patient. While embedding PHM applications in the EMR is expected from vendors that own the EMR technology, Enli currently has integration with Epic and GE's centricity products. They will continue to pursue other EMR vendors to offer future integration. With its expertise in provider workflows, Enli has the opportunity to more fully support engagement at all levels of the ecosystem. Enli is one of the few vendors in this market to have a pharmacist on staff.

The recent announcement of the partnership between Enli and Dell Services is a positive move for the industry. Dell will integrate the Enli platform into its cloud and utilize it as the centerpiece of its clinical analytics, care coordination, and care delivery solution. The partnership provides the resources to scale Enli CareManager and access to Dell's significant client base. For Dell, it will have greater access to the Enli team and the potential to drive the CareManager road map.

Challenges

Enli has accomplished many improvements and additions over the past 24 months. It needs to be cautious of the potential of staff burnout and continue to supply excellent customer service.

APPENDIX

Reading an IDC MarketScape Graph

For the purposes of this analysis, IDC divided potential key measures for success into two primary categories: capabilities and strategies.

Positioning on the y-axis reflects the vendor's current capabilities and menu of services and how well aligned the vendor is to customer needs. The capabilities category focuses on the capabilities of the company and product today, here and now. Under this category, IDC analysts will look at how well a vendor is building/delivering capabilities that enable it to execute its chosen strategy in the market.

Positioning on the x-axis, or strategies axis, indicates how well the vendor's future strategy aligns with what customers will require in three to five years. The strategies category focuses on high-level decisions and underlying assumptions about offerings, customer segments, and business and go-to-market plans for the next three to five years.

The size of the individual vendor markers in the IDC MarketScape represents the market share of each individual vendor within the specific market segment being assessed.

IDC MarketScape Methodology

IDC MarketScape criteria selection, weightings, and vendor scores represent well-researched IDC judgment about the market and specific vendors. IDC analysts tailor the range of standard characteristics by which vendors are measured through structured discussions, surveys, and interviews with market leaders, participants, and end users. Market weightings are based on user interviews, buyer surveys, and the input of a review board of IDC experts in each market. IDC analysts

base individual vendor scores, and ultimately vendor positions on the IDC MarketScape, on detailed surveys and interviews with the vendors, publicly available information, and end-user experiences in an effort to provide an accurate and consistent assessment of each vendor's characteristics, behavior, and capability.

Market Definition

IDC Health Insights defines population health as the people, processes, data, and information technology to improve the health of both individuals and communities. Typically, programs include management of gaps in care, location of care (e.g., emergency room use), and individuals with chronic conditions. This market provides guidance and tools to enable prevention of illness and maintenance of health.

Management of care has evolved over the past 20 years. In the late 1980s, payers began requiring authorization of non-emergent inpatient admissions and discharge planning. In the 1990s, technology emerged to automate authorization of inpatient admissions and discharges – the result of which was more consistent application of care pathways and more efficiency for the nurse reviewers. Many payers introduced high-cost care management and disease management. Even with the automation of nurse reviewer workflow, disease management still required very intensive work by nurse managers as they did most of their outreach by phone. In early 2000, technology was introduced that would reduce the labor intensity of disease management; while cost-effective, the technology-based programs required patients to go to a portal to get instruction or to enter data. Patient adoption of portals has been poor because it requires the patients to go outside of their routine processes and engage in the program.

Today, methodologies to prioritize patients and to help determine the best channels to reach out and touch patients are being developed. There are still patients who require personal touch, while others are just fine with light technology touch, and yet others need a combination of touch points. Advances are being made and incorporated into population health programs and are seen as productive.

Strategies and Capabilities Criteria

Table 1 provides information about the evaluation of population health management strategies. Table 2 provides information about the evaluation of population health management capabilities.

TABLE 1

Key Strategies Measures for Success of U.S. Population Health Management

Strategies Criteria	Criteria Definition	Criteria Weight
Offering strategy	The vendor's current development of offerings will be relevant and attractive to customers over the next three to five years.	
Offering road map	The vendor's breadth of offerings is expected to match directly to current customer needs to deliver maximum customer benefit over the next three to five years.	6.0
Cost management strategy	Strategies for developing and producing the supplier's offering lead to competitive offering costs and support competitive pricing, customer	1.0

TABLE 1

Key Strategies Measures for Success of U.S. Population Health Management

Strategies Criteria	Criteria Definition	Criteria Weight
	engagement, and future opportunities — specifically strategies to reduce implementation costs.	
Portfolio strategy	The offering is well supported and enhanced by a portfolio of complementary offerings offered by the company or its ecosystem of partners.	2.0
Other offering strategy	This category measures the capabilities of the vendor to execute on its product and support its clients.	1.0
Offering strategy total		10.0
Go-to-market strategy	The vendor's capabilities maximize the connection between offerings and customers, such as delivery, partnerships, pricing, distribution, marketing, sales, and service.	
Pricing model	The vendor will be willing to demonstrate value through flexible pricing mechanisms, including profit sharing–based relationships, over the next three to five years.	1.0
Sales and distribution strategy	Over the next three to five years, the vendor's sales/distribution structure will be aligned with the way customers, especially those in high-growth market segments, want to buy, as demonstrated by the vendor's predicted growth over the next 12 to 18 months.	6.0
Marketing strategy	The vendor's marketing organization, marketing messages, and account management structure are aligned with the priority customer segments and executing well over the next three to five years, as demonstrated by changes in marketing budget.	2.0
Other go-to-market strategy	The ability of a vendor to upsell its product because of other products offered by the vendor.	1.0
Go-to-market strategy total		10.0
Business strategy	The vendor's strategies to grow the business are aligned with market trends and future opportunities over the next three to five years.	
Growth strategy	The company is knowledgeable in both the healthcare payer and provider markets and the projected rate of growth as reported by the vendor. This category measures whether growth will occur through acquisition or organically or both.	7.0
Financial/funding model	This category measures the vendor's willingness to make changes to its pricing model in the next three to five years.	3.0
Business strategy total		10.0

TABLE 1

Key Strategies Measures for Success of U.S. Population Health Management

Strategies Criteria	Criteria Definition	Criteria Weight
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Source: IDC Health Insights, 2016

TABLE 2

Key Capabilities Measures for Success of U.S. Population Health Management

Capabilities Criteria	Criteria Definition	Criteria Weight
Offering capabilities	The offering's capabilities align well with current market needs and demands.	
Functionality capabilities	The offering matches directly to current customer needs to deliver maximum customer benefit. Integration with electronic health records and single versus integrated platform are also included in this criteria.	1.0
Delivery model appropriateness	The offering's maturity in the population health management market is measured.	2.0
Cost competitive capability	The length of installation time as a proxy for cost-effectiveness is measured.	1.0
Portfolio benefits	This category measures whether the vendor's product portfolio includes other capabilities to enhance population health management.	1.0
Range of services	This category measures the services the vendor provides to clients that are seeking advice on how to implement population health management.	2.0
Other offering capability	This category measures the types of data sources the vendor provides to clients.	3.0
Offering capabilities total		10.0
Go-to-market capabilities	This category measures the vendor's capabilities to maximize the connection between offerings and customers such as delivery, partnerships, pricing, distribution, marketing, sales, and service.	
Pricing model options and alignment	This category measures the vendor's willingness to demonstrate value through flexible pricing mechanisms.	1.0
Sales/distribution structure capabilities	This category measures whether the current sales/distribution structure is aligned with the way customers want to buy.	2.0
Marketing capability	This category measures how well the vendor's marketing organization, marketing messages, and account management are aligned with the priority customer segments.	1.0

TABLE 2

Key Capabilities Measures for Success of U.S. Population Health Management

Capabilities Criteria	Criteria Definition	Criteria Weight
Customer service	This category measures the vendor's resources that are available to clients to support their product and feedback from clients.	4.0
Other go-to-market capabilities	Flexibility of training and installation location are measured in this category.	2.0
Go-to-market capabilities total		10.0
Business capabilities	This category measures whether financial, employee, partner, and R&D management, among other capabilities, are in alignment with current market opportunities.	
Growth strategy execution	This category measures the vendor's client distribution across appropriate market segments.	4.0
Innovation and R&D	This category measures the pace of continued R&D investments.	1.0
Financial/funding model	This category measures how a vendor funds research and development.	3.0
Other business capabilities	This category measures the vendor's ability to reference its clients and direct client feedback.	2.0
Business capabilities total		10.0

Source: IDC Health Insights, 2016

LEARN MORE

Related Research

- *Perspective: Next Generation Population Health Technology* (IDC #US41547716, June 2016)
- *IDC MaturityScope: Population Health Analytics* (IDC #US40909115, April 2016)
- *Perspective: Operating Models Emerge for Accountable Care* (IDC Health Insights #HI255186, April 2015)
- *Business Strategy: Road Map to Becoming a Financially and Clinically Sustainable Value-Based Organization* (IDC Health Insights #HI251505, September 2014)
- *Best Practices: Lessons Learned by Early Adopters of Population Health Management* (IDC Health Insights #HI249411, June 2014)
- *IDC MarketScope: U.S. Population Health Management 2014 Vendor Assessment* (IDC Health Insights #HI247880, April 2014)
- *Perspective: Population Health and Accountable Care Sustainability* (IDC Health Insights #HI245971, January 2014)
- *U.S. Accountable Care 2014 Top 10 Predictions: Collaboration, Sustainability, and Technology* (IDC Health Insights #HI245565, January 2014)

- *Business Strategy: Accountable Care Maturity Model* (IDC Health Insights #HI240916, May 2013)

Synopsis

This IDC study presents a vendor assessment of the population health management market through the IDC MarketScape model. As healthcare organizations transform to value-based reimbursement and care, the need for tools and methodologies to improve clinical and financial outcomes becomes critical. At this nascent stage of population health management, the approaches have been based on historical methods, and with maturity, the need to be more precise in our analysis, more personalized in care plan development, and more proactive in patient engagement will continue to grow.

"Since the publication of the *IDC MarketScape: U.S. Population Health Management 2014 Vendor Assessment* (IDC Health Insights #HI247880, April 2014), there have been significant improvements to the technologies and expertise of the vendors. Some vendors have exited the market, while others have for the first time qualified for inclusion. Market maturity will continue to grow at a rapid pace," Says Cynthia Burghard, research director, Accountable Care IT Strategies.

About IDC

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