



**Speaker Podcast Series
TRANSCRIPT**

Roy Schoenberg, CEO of American Well Systems



Featured 4th Annual WHIT keynote presenter



Interviewed by Lola Butcher, health care journalist

This is Lola Butcher, health care journalist, here with Roy Schoenberg, a medical doctor and founder of American Well (Systems), a new online health care marketplace. Dr. Schoenberg will speak at the 4th Annual World Healthcare Innovation and Technology Congress, December 8-10 (in Washington, D.C.). Dr. Schoenberg, thanks for joining me.

Thank you for having me, Lola

American Well is one of many companies that is moving some health care delivery online. Please tell us how the American Well health care market place works?

Thanks, Lola, I'll try to be brief in describing it, but essentially what we do is deploy the system through health plans, and health plans allow their existing membership to interact using the system with their existing providers that are already on their provider networks. The system itself brokers the availability of any one of these different providers and makes those providers available to the consumers to the members of the health plan using either the telephone or a browser.

Through the interaction they can exchange medical information, they can talk to each other, they can actually see each other, and the physician has the ability to carry out the different kind of functions that would typically happen in an exam room, including guiding the patient, providing education, as well as diagnosing, prescribing and providing follow-ups.

What types of physician, patient interaction are appropriate through American Well?

I think the reality we all have to acknowledge is that in different circumstances different patients may provide or not provide enough information for physicians to take certain actions. Sometimes – even in an exam room – the physician doesn't know enough to

provide guidance or follow-up, and they ask for additional labs or referrals. What we're trying to do here is not to create another kind of care, but really to expose the same kind of interaction that would happen in an exam room.

It is up to the physician at any point in time, to actually take their existing professional discretion and determine what kind of scope of guidance or what kind of scope of care they can deliver to any one patient. Granted, we don't expect patients who have chest pain or have just gone through a car accident to log on to anything, but the reality is that as time goes by we're learning of a wider and wider scope of applicable medical conditions - whether these are acute or chronic - that can actually benefit from some use of online care.

Your first major contract is with a large Blues plan. How does American Well get paid for the services your company offers?

American Well is really the technology vendor, and like many other vendors of health plans we sell our product to the health plan and the health plan deploys it through its existing systems. We are paid by the health plans a license fee that corresponds with the size of the magnitude of the population that the plan is offering this to, and we are also benefiting from a transaction fee, which literally allows us to keep the license very small and say to health plans, 'Well, you know, we believe this is going to make a huge impact on health care consumption and on the health care system. We are aligning ourselves with you, and as transactions increase, both of us actually win.' So these are the two general components of the pricing of the system.

How does the physician who provides the health care get paid for his or her work through American Well, and how much does that physician get paid?

You mentioned that there are many different software companies that are moving into the process of using technology for health care delivery, and I think this is really where the system is set apart because unlike many of the other systems where you're paying the physician on a chat basis or whatever it is, this system really sits on top of the existing infrastructure of health care delivery, which means when a patient is interacting with a physician, essentially a health plan member is interacting with a health plan physician.

The entire processing of payment, as is traditionally the case in office visits including co-payments from the patient and including submission of a claim and collecting of a fee a reimbursement from the health plan for the physician, all of that is done automatically in the system. Literally the physician can go into the system, practice health care, and as simplistic as it sounds, money will show up in their bank account. It is that simple.

Thank you Dr. Schoenberg. To hear more of Dr. Schoenberg's insights, be sure to attend the 4th Annual World Healthcare Innovation and Technology Congress, Dec. 8-10 at the Mandarin Oriental in Washington, D.C. www.whitcongress.com