Why Healthcare Should be the Last Industry Keeping Us Waiting

We used to spend a lot of time waiting: standing in line at the grocery store, the post office, the pizzeria, the bus stop.

In the last decade, tech has pioneered solutions that eliminate those thumb-twiddling gaps of life. The act of waiting is becoming a relic of its own, with mobile apps that enable us, in simple and affordable ways, to delegate that responsibility to the power of the crowd. We're looking at you, Shipt, and you, Grubhub. Cheers to making our lives more convenient.

So why is health care keeping us waiting? Why is our most crucial, life-or-death industry still rife with lines that feel to many in America like an unending obstacle course?

From the estimated \$88 billion borrowed by Americans to pay for health care in 2018 to the widespread lack of access to care in rural areas, health care is a complex, costly, and often inefficient beast. There's no easy, immediate fix for health care.

But the waiting? We can fix that. In fact, we absolutely *must* fix that. Because the fragile physical and financial well-being of many Americans is adversely affected by how long a patient is forced to wait before seeing a medical professional—regardless of the severity of the patient's initial symptoms.

And the blueprint for the solution is, in some part, already here, as simple and easily adaptable as the wait-free apps we use every day.

Waiting for Care

Let's talk about the gray area: the limbo that exists between a patient's first emergent symptom and their first encounter with a medical professional.

The duration of this waiting period all depends, really, on three factors:

- 1) symptom severity.
- 2) proper understanding of available care options.
- 3) how much the patient is willing and able to pay.

Before walking into their place of care, the entire burden of triage—determining the right place of care based on the patient's symptoms—is the sole responsibility of the patient.

Who, unless they work in a medical field, has little understanding of how the process works, and who is understandably largely influenced by the cost of care.

Jane: The Case Study

Let's take Jane, for example. Jane has all the symptoms of a urinary tract infection—one of the most common non-emergency reasons for visiting the ER. She does a quick Google search, but isn't entirely sure her symptoms match the UTI diagnosis.

Jane lives in San Francisco, where it takes an <u>average of 24 days</u> to see a primary care physician. With her insurance, this is her most affordable option, but also the lengthiest wait.

Jane doesn't know her UTI can be treated at an urgent care. She waits two days, thinking she can rely on at-home remedies instead.

Jane ends up at the ER. Her last-ditch, health care option, because it's open 24/7. She sits in the waiting room for three hours before she sees a doctor because her symptoms are minor in comparison to those of other patients.

Finally, with symptoms much more painful than those that first emerged, she gets the care she needs.

Jane leaves the ER with a bill 10x more than what she would have paid at an urgent care or with a telehealth visit.

Who wins here?

Ding ding. There's no winner. Jane suffered through uncomfortable symptoms for too long and was saddled with a bill she'll spend months paying off.

The ER staff spent time and resources treating a non-emergency patient, taking time away from true emergency patients.

The insurance company shells out a much larger chunk of change.

How do we fix it?

You catch it like any good doctor does: when the symptoms first emerge. You "nip it in the bud", so to speak.

Telehealth, in all its simplicity, is the gateway to better, more effective modern day health care. Telehealth mitigates the unnecessary cost, physical pain, and long-term emotional stress incurred in the case study above by:

- Adapting and applying the ease and accessibility of grocery delivery or ridesharing apps to health care.
- Making the first encounter with a medical professional *immediate*.

• Taking the burden of triage off the patient's shoulders.

And yet, most patients experiencing symptoms *do not* use telehealth services. Uber and Lyft report up to 43% usage by the U.S. adult population in certain studies; telehealth services claim only 17% usage.

But the mystery around telehealth is dwindling. Emerging technologies, including EMBER's own <u>AI medical assistant</u>, <u>24/7 video</u>, <u>audio</u>, <u>and live chat features</u>, are slowly but surely increasing adoption rates. By enabling patients to be fully informed about their health from the very first symptoms, we can save America \$20 billion a year in avoidable ER trips, and keep people healthier longer and waiting less.

The solution is already here—it's up to us, as providers, to educate patients on the options available to them.

About EMBER Medical

EMBER is an affordable, mobile AI medical assistant that connects you with the right medical professional within our network to evaluate your early onset symptoms within minutes. It shortens illness times by evaluating your symptoms when they first appear, eliminates unnecessary medical bills, and reduces the time it takes for you to see a doctor by providing the best possible care. Learn more at embermed.com.