Healthy WorkLife
an online resource for Wellness managers

Mobile Health Gaining Momentum as an Effective Tool For Patient Engagement

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By Scott McClintock, Chief Marketing Officer, Alere Health



When Apple launched its mobile apps store in 2008, it had 500 applications that customers could download onto their mobile phones.[1] Today, four years and 3 billion downloads later, it offers 210,000 apps.[2] Imagine how many it will have next year, or in five years.

Apply that to mHealth (mobile health). Right now, there are 13,000 medical or fitness apps available.[3] By 2020, at least 160 million Americans with at least one chronic condition will be monitored and treated remotely via a mobile health application.[4]

Mobile health is increasingly recognized as a promising solution for enhancing patient engagement and improving outcomes. With the introduction of the iPhone and apps, we entered the mHealth era – characterized by an explosion of personal health apps that consumers eagerly downloaded to help them improve their diets, lose weight, quit smoking and track biometric measures like cholesterol or blood pressure.

Health management companies like Alere Health, LLC, view mobile health apps as a way to reach and engage more individuals who have chronic conditions but are not enrolling in chronic care programs. We also believe they are an alternative for people on the go who don't want to be tied to at-home devices to stay connected to their caregivers.

While mobile health apps have only been around for a short time, we are already evolving to mHealth 2.0. Stand-alone "electronic diaries", which presented a "cool" replacement of traditional hand-written personal health diaries, are showing signs of giving way to interactive applications for particular illnesses like diabetes or heart disease that connect consumers to their physicians and clinical systems. Linking electronic diaries to caregivers gives them insight into what is happening with a patient at home or on the move, bridging that gap as it exists today.

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Alere Takes mHealth to Next Level



The Mya™ mobile health solution is among the first mHealth solutions to be integrated with a clinical care management.

Alere recently introduced the Mya™ mobile health solution, which is among the first mHealth solutions to be integrated with a clinical care management system. The Mya™ solution allows Alere's clinicians to provide support when needed and behavior change features, such as trackers, reminders and challenges. What we're doing is going beyond providing static coaching by including a real-time tool that easily shares valuable personal health information with our nurses, who can communicate directly with the participant if needed.

The Mya™ dual solution includes Diabetes Coach for lower-acuity participants and DiabetesManager® – an FDA-cleared solution powered by WellDoc® and enabled by AT&T® – targeting higher risk and higher acuity participants who require more intense clinical monitoring. Alere plans to expand its offerings to manage additional chronic conditions.

This approach brings the appropriate set of tools to each targeted member, maximizing engagement and setting the stage for improved outcomes. Each solution brings a unique set of capabilities for the targeted member. High acuity members receive real-time, actionable feedback and coaching based on their blood glucose monitoring from DiabetesManager®. Lower acuity members benefit from receiving personalized alerts and messages based on tracking their health data.

The mobile solutions are integrated with the Alere advanced clinical care management system to provide active, clinically-based care management, with live clinicians available 24/7. Both Diabetes Coach and DiabetesManager® allow participants to connect to a live clinician as needed.

The Mya™ mHealth solution is but the beginning of a new way of looking at healthcare delivery. Although it is fairly early in the game for mHealth 2.0, significant signs indicate that mHealth is on the brink of revolutionizing how care is delivered. For instance, the technology is already being used to deliver care to remote locations in poor countries that lack strong healthcare systems, such as India and Africa.

If they can do it, the U.S. cannot be far behind

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About the Author

Scott McClintock has led Marketing for Alere Health since January 2007. He has more than 20 years of marketing and communications experience, including leadership positions with major corporations and advertising agencies. Prior roles include Head of Global Marketing for Premiere Global Services and Head of Branding, Marketing and Communications for Equant (now Orange Business Services).

Scott has also served in top leadership positions for several advertising agencies including BBDO, Ogilvy & Mather, Rubin Postaer, and WayneWest. Scott earned his bachelor's degree in both marketing and computer science from the University of Texas, Austin.

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