

4sight Health Roundup
Taking Consumers' Digital Health Pulse
10/30/25

David Burda:

Welcome to the 4sight Health Roundup podcast, 4sight Health's podcast series for healthcare revolutionaries, outcomes matter customers, count and value rules. Hello again, everyone. This is Dave Burda, news editor at 4sight Health. It is Thursday, October 30th. Tomorrow is Halloween. I honestly think nothing could scare me tomorrow after the first nine months of the Trump regime, and we haven't even seen the Epstein files yet. Instead, we're gonna pick up where we left off last week and talk about consumers use of health apps and websites to manage their own health with Dave Johnson, founder and CEO 4sight Health, and Julie Merchants and partner at Transformation Capital. Hi, Dave. Hi, Julie. How you two doing this morning, Dave.

David W. Johnson:

We're getting used to living at the very western edge of the eastern time zone in West Michigan. It's light later, which is fantastic, but it felt like midnight at 7:00 AM this morning when I got up to start prepping for this podcast. Yeah.

Julie Murchinson:

Welcome to my world.

Johnson:

The Darkness is descending. That's appropriate for Halloween week.

Burda:

Yeah. It's just, just you and the raccoons are up at that hour, huh? Exactly. <laugh>, Julie, how are you?

Murchinson:

I'm well. I'm in my old haunt in San Francisco, and I gotta say, things are kinda hopping here. Waymo's everywhere.

Burda:

Mm-Hmm <affirmative>. Okay. and nobody kicks 'em over or pushes 'em over or runs into 'em, or

Murchinson:

A lot of people honk at them, which makes me laugh. 'cause Of course they, they don't honk back <laugh>.

Burda:

That is really funny. Thank you. Now before we talk about consumers and health apps, thanks to a new report from the Kaiser Family Foundation, let's talk about scary movies. Tomorrow is Halloween, after all. Dave, what's the scariest movie you've ever seen, and why did it freak you out?

Johnson:

The Flying Monkeys and The Wizard of Oz used to terrify me as a kid, but I'm gonna pick the 2025 vampire movie Sinners. For the first half of that movie, vampires are around, but everything seems normal, even though it isn't. Midway through the movie, all hell breaks loose. The whole narrative feels like a metaphor for our current moment in America. Things seem normal for the most part in Trump's America, but they're not. The halfway point will be the 2026 midterm elections. We'll see.

Burda:

Yeah. Yeah, yeah. No, I, that's a great parallelism right there. Thank you. Julie, how about you?

Murchinson:

Well, I guess I kind of have two answers. One is I ended up somehow at the theater for the movie Halloween when I was eight. Not appropriate. Yeah. It was definitely like, friend related, not my parents' fault, you know, so I've not been the same since then. But my parents did let me watch Jaws and it took me like a solid 30 years to get over it. And now I'm a scuba diver, so I've come full circle, but, you know, dun, there's a lot back. Bad dun, dun dun, dun dun. Yeah.

Burda:

Actually the movie Halloween. That's, that was the first date I took my wife on.

Murchinson:

Stop.

Burda:

Swear to God. Swear to God. <Laugh>. Oh my gosh.

Johnson:

<Laugh>. And she went on a second.

Burda:

Yeah. Wow. Can you believe that? Can you believe that, that the rest is history? But for me, the, it, it, it's the original night of the Living Dead. I watched it alone on a small black and white TV in my bedroom when I was about 12 years old, and it was lights on at night for a week after that. So and Julie, you were able to conquer your fears, but not me. You know, I think about, you know, how I would get outta my basement during a zombie attack. And you know, what that movie taught me was you need more than one exit, right? <laugh> don't back yourself into a room without another exit. And yeah. And no health app is gonna help you out of that jam. And there's your transition. Let me tell you about the results of a new KFF consumer poll and get your reaction. This continues the conversation we were having last week about the boom in direct to Consumer Healthcare Services. KFF surveyed about 1300 US adults on their use of healthcare apps and websites to manage their own health. Here are some of the top line findings. 75% of consumers said they used a healthcare app or website within the past year to manage their health. The most common reason they did so was to look at their medical record or lab test results cited by 71% of the respondents. Interestingly, only 35% did so for a telemedicine

appointment. That's something we also talked about on last week's show, 65% said using apps and websites has made managing their health easier. 70% said it was easy to use multiple apps and websites, but less than a third said they would trust medical advice from an app or a website if they had advice came from AI rather than a real person. Now, how would they know if it came from AI or a human? I'm not sure. Dave, if I run a hospital or health system or medical practice, and I see these results, what's my takeaway and how would they affect my digital front door strategy?

Johnson:

Zombies, vampires, and Sharks? Oh, my <laugh> Dave, this, these are easy questions to answer, but hard strategies to execute you know, takeaways and strategies. So number one, if you're a health system or a provider of any kind, you're out of time. Run. Don't walk to focus your strategy on meeting the health and healthcare needs of your end user. Consumers. Two, stop investing in high cost, centralized delivery channels. They will become an albatross on your organization's financial standing. Remember, 3D WPH and CB two E two. For those of you who haven't memorized the customer revolution that Paul and I wrote published almost a year ago 3D WPH stands for Democratized and Decentralized Distribution. That's the 3D part of Whole Person Health. That is the disruptive innovation that's gonna bring down the Healthcare Castle as it currently exists and deliver us to the Promised Land. And the companies that will remain relevant will be practicing CB two E two. They're gonna make it cheaper, better, more balanced between health and healthcare, easier and empowering for consumers and for caregivers. So, 3D WPH; CB two E two, memorize those. Also remember the Aggravators Advantage. Chapter nine, build one app that covers the map. Don't let Epic design your patient portal. Socialism doesn't work. Just to drive that last point home the two most financially successful health systems today are Advent and Baylor. Scott and White. Each has built their strategy on consumerism, on serving end users. Sometimes called patients, sometimes called consumers, sometimes called customers. They've done the down and dirty workflow adjustments to make sure their apps work, no phantom appointments. They've invested in understanding the consumer's healthcare journey, hired all kinds of people to make that work. And they're reaping the benefits by adding new members to their networks through the app. One finding in the Kaiser study that irritated me was that 70% that it's easy to use multiple healthcare apps. Kind of, so what? One app that covers the map. Consumers shouldn't have to integrate their personal health data from multiple sources. So let's figure that out. The last piece of advice is get on the interoperability bandwagon. Commit to meeting CMS's goal of becoming an aligned network in 2026. Data wants to be free. It wants to flow to where it can offer the most benefit. Let it be so. Two other things I just wanted to note about the Kaiser survey that I found interesting was that when asked about Medicare priorities, 81% said they wanted better data sharing of their health information. Hello, interoperability. And 65% said that they wanted apps to help them manage chronic conditions more effectively. Those seem like pretty astute priorities that the American people have landed upon. And then the final point I'm gonna make is 4sight Health is putting its money where its mouth is. We're partnering with Jeff Logan's fledgling company Plorous to advance healthcare consumerism. For those of you who don't know Jeff he was the 2024 gold medal winner of the customer Experience Officer of the year across all industries for the work he and his team did at Providence. As Jeff and I have talked about positioning as company, we've

concluded that Plorous is competing against non-consumption. That's a fancy Clay Christensen term for meaning that nobody's really doing consumerism in a big way. So health systems need as services even though they don't know it. So in response, Jeff has created a masterclass titled Consumerism introduces Itself to Us Healthcare to draw that link between the need and the way to think about meeting it. If you wanna hear it reach out and we'll set up a class for you. And just remember the consumerism clock is ticking.

Burda:

Yeah, I hear it. I hear it loud and clear, Dave. Thanks Julie, any questions for Dave?

Murchinson:

Dave, that was amazing. I personally can't even keep up with all the acronyms, but it <laugh> so impressive, <laugh>. So if you're running a system today, what's the one thing you could or would do to deliver more value to people who are flocking now to the His and Hers and the Lily Directs and, you know, all the other DDC apps, like this report is, you know, a little bit more about accessing data through some of the, the older school ways of thinking about digital health tools. How could you start to bridge the gap and capture some of those people?

Johnson:

Yeah, yeah. You know, I'm a little behind on my video consumption. So I'm working my way through billions the series about the

Murchinson:

So good.

Johnson:

Yeah, it's about the outta control hedge fund and the district attorney chasing after them. But in season three there's this venture capitalist named Oscar Langstrop, a really interesting character and a big adherent regarding disruption. And he says disruption works. It's efficient, but uncomfortable. And then he goes on to say the future hurts, but only once; denying it stings forever. What a great quote. The future hurts, but only once; denying it stings forever. So I think my one piece of advice is don't deny the future. Doing it will sting forever. I don't wanna hear anymore about one foot in the value canoe and another foot in the volume canoe. So what does all that mean? It means prioritizing your systems digital health strategy for end user consumers in the process become more asset light. Health system's, biggest assets are their brands. Make them synonymous with value and consumerism. By the way, another point in that Kaiser study when asked about their concerns with the Big Beautiful Bill and the cuts to the affordable Care Act subsidies related to access and affordability, that's who wins in the future. Those that can make the system more affordable and those who can make it more accessible. So, like other industries, healthcare is moving toward becoming a, a unified tech enabled ecosystem. That's got three parts to it, you know, the stack, it's the data layer, the intelligence layer, and then the app layer. And they all work together in a unified way to drive end user engagement with the right tools at the right time, doing the right things. So just like the sun will rise tomorrow, healthcare ecosystems are coming, don't deny it. Get ready.

Burda:

I'd be happy if I never see that two canoe slide again in presentations. I know, I know,

Johnson:

I know,

Burda:

I know <laugh>. Thanks Dave. Julie if I run a digital health tech company or a startup, what's my takeaway from these results and how does it affect my business model or my marketing strategy?

Murchinson:

Well, okay, so just looking at these results, I'm not so sure I believe everything I'm about to say, but I'm gonna go for it. The good news is, <laugh> good news is adoption is really becoming less and less of a hurdle. Three in four adults, including Medicare seniors, are using patient portals and some digital care apps. So, okay, that's good news, bad news. Trust is our problem. Our friend Jan Berger called it years ago. And I don't know that this really represents all people I think about in our system, because trust has been such a big issue for the last, at least, at least five years. But, you know, people don't trust tech companies or health plans or the government today, right, to handle their data. And if they do trust anyone in healthcare, they're gonna trust their doctors and hospitals and, you know, other clinicians. So means that, you know, if I'm a digital health company, my business model, my go-to-market strategy needs to borrow trust from the healthcare system. So I see so many companies today that are AI companies, companies, <laugh>, I know and love who have really put AI at the top of how they talk about themselves. And if I were them, I would lead with clinical and lead with the provider relationships, not the tech brand.

Johnson:

Mm.

Murchinson:

Patients and health systems, you know, wanna use these tools, but they wanna, they wanna know that it's it's somehow blessed. So if it's not gonna be doctor forward, let's talk about kind of health forward, like, you know, stop selling, kind of the data side of it. Sell the accuracy, safety or just value to your life side of it. So I don't know. I see a lot of a lot of potential there. AI is being used today as a thing, but we all know that AI is gonna become more part of everything. It's the fuel, right? It's not the value proposition itself. So I don't know that the public's really ready for, like the AI is gonna diagnose you. I know that some of us are ready for that, and I love talking about it. I spent an hour and a half with Molly Chloe yesterday talking about where AI is gonna take us in healthcare. And her thoughts around how it shifts the system are incredible. But that's, I don't think what most consumers wanna hear today. They wanna hear, it's like behind the scenes and it's, you know, it's gonna reduce your delays at the ER or it's gonna help your clinician monitor your chronic condition. So I guess I'm really leaning into this 'cause I see a lot of AI out there. I do think that something like more than two thirds of older adults want help

managing chronic conditions. Digital, you talked about this a little bit, Dave, right? But not in like a DIY way. So if your product can help coordinate care and support ongoing, you know, ongoing care or kind of change in the way you do things lead with that, you know, that's where Medicare and employers and I think health systems would invest. So we found digital health right now. I think the winning move is to be some sort of trusted extension of the care team or some you know, incredibly new way of helping you take care of your health in a highly clinically relevant, safe way, even if it has nothing to do with your doctor. And those two things are very different, and you're seeing those two things play out today, but that's how I would do it. Sell that forward.

Burda: (43:01):

Hmm. Yeah. Lead with the health, not the tech, right? Thanks Julie. Dave, any questions for Julie?

Johnson: (43:14):

Yeah. Outcomes over process ultimately, right? What's your assessment on how close we are to having a unified, fully interoperable longitudinal health record that individual consumers can use to manage their health and healthcare jobs to be done, obviously in combination with, with companies that, that help them solve those issues. And, you know, you, you mentioned walled garden before. Do we have to break epic's walled garden in order for this holy grail of healthcare tech to materialize?

Murchinson:

I'm holding on to hope for what the CMS interoperability efforts are doing. And I think by definition that is in many ways, breaking down the epic walled garden, even though epic's part of it, there are agreements and ways in which they, those companies, 60 companies working together on how information should flow what permissions, information travels with that should make it more available throughout multiple apps. Notice what I said there, Dave. Like, I don't think we're getting to like one, one place, but we should be getting to one bigger picture in more of a consumer's choice as to where they wanna view that picture or how they wanna put that picture together. Now granted, if this interoperability thing falls apart, I mean, I'm just gonna have to put it in the, the cemetery <laugh> of really big swings. Yeah. But I don't know, I have high hope. Let's see where we are a year from now on this, honestly.

Burda:

Well, what I found found interesting about the, the survey about 400 of the respondents self-identified as MAGA Republicans and about 600 self-identified as make America healthy against supporters. I would've liked to see that breakout. Makes me wonder why Kaiser didn't publish those results, and maybe they were too scary, right? Okay. Let's talk about other big healthcare news that happened this week. Julie, what else happened this week that we should know about?

Murchinson:

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Well, Steve Corwin's announced his retirement from New York Presbyterian, which is the end of a major era. I think we've known this is coming for a long time, but it's end of an era. Thank you, Steve.

Burda:

Dave, what's your big story of the week?

Johnson:

Well, mine, mine isn't a healthcare story. I'm, I'm focused on this Amazon announcement that they're cutting 14,000 white collar jobs. And that's only the start of it. There are internal documents that say they want to hire 600,000 fewer blue collar workers over the next decade, and they're investing like crazy in data centers and robots. So Julie, a little, like you were saying earlier, AI is here as the Borg say in Star Trek resistance is futile. I'm looking at the Amazon announcement as a canary in the coal mine for the economy as a whole, but particularly for what AI could do to wreak havoc on the inefficient business practices embedded within the current US healthcare system.

Burda:

That's pretty scary. All right. That is all the time we have for today, if you'd like to learn more about the topics we discussed on today's show, please visit our website at 4sighthealth.com. You also can subscribe to the roundup on Spotify, apple Podcast, YouTube, or wherever you listen to your favorite podcasts. Don't miss another segment of the best 20 minutes in healthcare. Thanks for listening. I'm Dave Burda for 4sight Health.