	1	1			1			
Key Partners	Key Activities	Value Propositions - Custo		Value Propositions - User (End User + Caregiver)	Customer Relation		Customer Segments	
Who are our Key Partners?	What Key Activities do our Value Propositions require?	What value do we deliver to		What value do we deliver to the customer?		onship does each of our	For whom are we creating v	
Who are our key suppliers?	Our Distribution Channels?	Which one of our customer's	s problems are we	Which one of our customer's problems are we	Customer Segments expect us to establish		Who are our most importan	t customers?
Which Key Resources are we acquairing from partners?	Customer Relationships?	helping to solve?		helping to solve?	and maintain with			
Which Key Activities do partners perform?	Revenue streams?	What bundles of products an		What bundles of products and services are we	Which ones have		Primary Users	
		offering to each Customer S		offering to each Customer Segment?		rated with the rest of our	- Seniors (65+), Lower & M	
MOTIVATIONS FOR PARTNERSHIPS	<ol> <li>Users taking medication regularly and getting refills</li> </ol>	Which customer needs are v	we satisfying?	Which customer needs are we satisfying?	business model?		<ul> <li>Caregivers (Children, spo</li> </ul>	uses, paid at home
Optimization and economy	<ol><li>Stakeholders tracking adherence</li></ol>			, , ,	How costly are the	v?	caregivers)	
Reduction of risk and uncertainty Acquisition of particular resources and activities	<ol><li>Insurance/ACOs execute on customer</li></ol>	1) Increasing Medicare Star	rs rating (for insurance)	<ol> <li>Making getting refills on time simple and easy</li> </ol>		,	- ACO Doctors	
Acquisition of particular resources and activities	acquisition/recruitment	a) Saving money by	decreasing Insurance pool	<ol><li>Easing the stress of checking drug interactions</li></ol>		ent and effective service for users		
Key Partners:	<ol><li>Checking drug interactions</li></ol>	payouts	<b>3</b>	<ol><li>Easing the stress and time burden of medication</li></ol>	<ol><li>High quality ass</li></ol>	urance of physical product	The state is a lot of a second	
1) Customers are partners - Insurance and ACOs	<ol><li>Communication between stakeholders</li></ol>	<ul> <li>b) Saving money three</li> </ul>	ough increased Medicare	record keeping	3) Managing non-a	dherence validation and interventions	Two digital platforms:	
2) Contract manufacturer + supply chain	<ol><li>Regulatory approval (FDA)</li></ol>	reimbursements		<ol><li>Easing the stress of user&lt;&gt;caregiver medication</li></ol>		pard/analytics management with	- Primary user (patient): foc	
3) Contractor to help with IEC 60601? Class 1 medical		<li>c) Increasing brand a</li>	anneal	check-ins, and enabling more valuable time spent on	customer (insuran	ce/ACO)	adherence and lifestyle app	
device approval?	Key Resources	<ul> <li>d) Checking other Sta</li> </ul>		care and on leisure	Channels		<ul> <li>Secondary users (Caregiv</li> </ul>	
4) HIPAA + data security contractor	What Key Resources do our Value Propositions require?			5) Creating a simple, effective, and time-efficient routine		annels do our Customer Segments	Monitoring medication adhe	erence practices
5) Mobile network operator	Our Distribution Channels? Customer Relationships?	customer	ge length of time as a	around dosing	want to be reached			
			ess through routines and	6) Restoring the look and feel of a home (part of their			1) Incurance Improved me	diagra star rating descenses
<ol> <li>Third party logistics, if not handled by the customer</li> </ol>	Revenue Streams?		ess unough routines and	identity) that would otherwise be invaded by medical	How are we reach			edicare star rating, decreased
7) 24/7 user support		ecosystem		devices	How are our Chan		payouts, improved custome	
8) Potential integrations:	TYPES OF RESOURCES Physical		ment service is a perk that	<ul><li>7) Save money on medical bills through better outcomes</li></ul>	Which ones work b			to a holistic view to improve
-Pharmacy	Physical Intellectual (brand patents, copyrights, data)	they would lose			Which ones are m		insurance pool health	
-Healthcare Provider	Human	<ol><li>Improvement in patient o</li></ol>		from adherence	How are we integrate	ating them with customer routines?		
-Customer Analytics	Financial	<ul> <li>a) ACO's are directly</li> </ul>	incentivized by outcomes	a) Better lifestyle		-	2) ACO- Improved analytics	s/data for doctors to make
<ol><li>Computer vision licensing, if not handled in house</li></ol>		<li>b) Everyone wants a</li>		<li>b) More money stays in the family</li>	Direct Sales			sed cost of care per patient
	<ol> <li>Individualized behavioral nudge technology and</li> </ol>	(personal and corporate value	ues alignment)	<ol> <li>Live longer and healthier through increased</li> </ol>		outreach, contract advocacy, affiliate	while improving outcomes	
Key Resources and Activities:	strategy	4) Improvement in brand im		adherence and increased provider insight		d pilot, novel product features, efficacy		
<ol> <li>Building and distributing the device</li> </ol>	2) Caregiver app	<ul> <li>a) Wanting to be seen as invested in patient</li> </ul>		<ol><li>Restore independence, allow independent living for</li></ol>	data, customer research		3) User- clear understandin	ig about own
2) Resolving regulatory risk	<ol> <li>UI/UX for the elderly</li> </ol>	health		longer	Purchase - Direct sales		medication/health, reduced	
3) Buildout of product ecosystem	<ol> <li>Computer vision label reading tech</li> </ol>	<ul> <li>b) Wanting to be seen</li> </ul>	n as innovative	10) Removing the ambiguity around which meds do	Delivery - Implementation of project, delivery to			n-disruptive fit into their lives
4) Customer support	5) Cellular connectivity			what	customers		(behaviorally, visually, aura	
4) Customer support	6) Proof of efficacy (clinical trial?)	<ul> <li>c) Wanting to be seen as integrating p lifestyle needs</li> </ul>		11) Creating a meaningful technological interaction				y procedures as a result of
	7) Contract manufacturer		and a state of the	as having personality and health designed for elderly users 12) Connecting individual action on healthcare to pro-			preventative medicine	y procedures as a result of
	<ol> <li>Someone who knows how to sell to insurance</li> </ol>				and/or indivudal analytics reporting, data security		preventative medicine	
1		5) Visibility into pool analyti						
1	<ol><li>Web apps (analytics, provider interface)</li></ol>			Social Deficities			<ol><li>Caregiver- decreased stress in managing logistics of a</li></ol>	
	10) Regulatory expertise b) For informing futu 6) (Potentially) enabling lin insurance or provider and p		e product development					re opportunities to enjoy thei
							time with a loved one (longevity and avoiding unpleasant	
			atient				conversations), an easy, consistent, and reliable method	
		<ol><li>Validating medication corr</li></ol>	onsumption				to monitor behavior	
Coat Structure								
			Revenue Streams					
Cost Structure			Revenue Streams	amore really willing to pay?				
What are the most important costs inherent in our busine	iss model?		For what value are our cust					
What are the most important costs inherent in our busine Which Key Resources are most expensive?	ass model?		For what value are our custo For what do they currently p	pay?				
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