

KLAS Spotlight

Wellsheet

TARGETING PHYSICIAN BURNOUT



Separating fact from fiction in emerging technologies



Why This Spotlight? (KLAS explains)

Physician burnout is a real problem, but Wellsheet has developed a solution that integrates into the EHR to improve workflow and identify gaps in care. This report looks to validate whether Wellsheet is helping to reduce physician burnout through customized workflows and physician coordination tools.

What Does Wellsheet Do? (A customer explains)

"The Wellsheet application extracts and reorganizes information in the EHR in a way that is more forward facing and clinically relevant to providers. For example, one challenge with our EHR is the amount of time that is required to spend inside it. The Wellsheet product brings data to providers so that they don't have to dig deep into health records to see the necessary information to make decisions." —Medical director

Bottom Line

Wellsheet customers report a high level of satisfaction, especially with the vendor interaction and engagement. Customers feel that Wellsheet listens and incorporates feedback quickly. Physicians see value in the application and are hopeful that development will continue to bring added benefits to save them time as well as improve patient care.

Key Competitors

Innovaccer, Juxly, PatientKeeper, Premier (Stanson Health), TransformativeMed

Number of Customers Interviewed by KLAS

6 individuals from 4 unique organizations
(out of all 8 customers live at time of data collection)

Makeup of Interviewed Customers

Hospitals and health systems that are clients of Cerner and Epic

Outcomes Expected by Customers

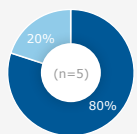
✓ Achieved ⌚ Pending ✗ Not achieved ⚡ Unexpected outcome

✓ Increased physician satisfaction ✓ Better quality of care

✓ ⌚ Decreased time spent in the chart ⚡ Bonus functionality

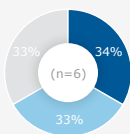
Wellsheet Customer Experience: An Initial Look

Overall Customer Satisfaction



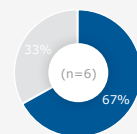
● Highly satisfied
● Satisfied
● Dissatisfied

Time to See Outcomes



● Immediately
● Within 6 months
● Within 6-12 months
● Not realized yet

Scalability



● Easy to scale
● Scalable with effort
● Not scalable
● Unknown/haven't tried

Wellsheet Performance in Key Areas (1-9 scale)

Supports Integration Goals	Product Has Needed Functionality	Executive Involvement	Would Recommend to Peers	Grading Scale
A (n=5)	B (n=5)	A+ (n=4)	A+ (n=5)	A+ = 8.55-9.0 A = 8.19-8.54 A- = 7.92-8.18 B+ = 7.65-7.91 B = 7.29-7.64 B- = 7.02-7.28 C+ = 6.75-7.01 C = 6.39-6.74 C- = 6.12-6.38 D+ = 5.85-6.11 D = 5.49-5.84 D- = 5.22-5.48 F = <5.22
Of 5 respondents, 100% would buy again.				

Strengths

- Customers enjoy high-quality support and proactive service
- Wellsheet quick to incorporate feedback
- Tool is efficient for rounding, decreases time spent in EHR



"Wellsheet has been very helpful. When we have any feedback, it is heard, and so much of that feedback has been implemented. Wellsheet has been very good at updating the product. In a year, our satisfaction level will be very good. The product is part of our long-term plans as far as I am concerned." —Physician

Challenges

- Tool not able to do everything physicians would like (e.g., can't do charge capture)
- Physicians would like to be able to pull in data from different systems
- Some functionality duplicative of EHR functionality



"I would like to see Wellsheet be the one solution where I work on my patients. I want to be able to use the system for rounding, looking up patient information, and putting in charges. I am not able to do all those things today. I have to go to a separate solution to do my charge capture." —Physician chief

Customer-Validated Features & Services

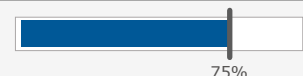
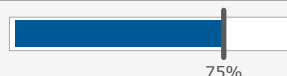
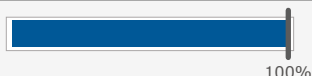
Wellsheet
Feature/Service

Predictive Physician Workflow

Team-Based Care Coordination

Decision Support

Percentage of Respondents
Achieving/Validating (n=4)



SPOTLIGHT

Wellsheet: Company Profile at a Glance

Founders: Craig Limoli, Justin Larkin

Year Founded: 2015

Headquarters: Greater New York City Area

Number of Customers: 8

Target Customer: Large multi-facility health systems that are clients of Wellsheet's EHR partners (including Epic, Cerner, Allscripts, and athenahealth); also pursuing payer partnerships

Number of Employees: 11–50

Total Funding: \$6.5M+

Investors: SpringTide Investments, BioAdvance, Newark Venture Partners

Revenue Model: Subscription fee (per user per month) for health systems, volume-based fee for payers

Wellsheet: Healthcare Executive Interview

Craig Limoli, CEO, Founder, and Chairman



What is your background?

I was an IBM strategy consultant in the Watson Health division for their flagship care coordination product. I saw how frustrated physicians were with the tools they had and the resulting toll that took on physicians. While I was a Wharton MBA student, I received federal government grant funding to address this challenge and founded Wellsheet in 2015. The Wellsheet leadership team includes top engineering talent from Carnegie Mellon, Amazon, and Betterment; product direction led by an MD and PhD who was a former Flatiron Health leader; and an advisory board of influential healthcare industry leaders and clinical executives.

Why was Wellsheet started?

EHRs are static. Often, physicians can only view patient records one way regardless of their clinical context and discipline. Federal stimulus incentivized the rapid and comprehensive adoption of EHRs, which prioritized regulatory needs over physicians' needs. I saw an opportunity to create a better experience for clinicians by leveraging advances in interoperability and machine learning and enabling providers to make decisions with a comprehensive view of relevant information that is structured precisely for their needs. The Wellsheet platform was architected for physicians in close collaboration with them.

What is Wellsheet's greatest differentiator?

Wellsheet is a complete workflow support platform that reshapes the core EHR experience for physicians by aggregating disparate information in an easily digestible format. The patent-pending analytics and machine learning that drive the Wellsheet back end are powered by thousands of clinical guidelines and patient encounters and refined by every interaction the provider has with the product. This breadth allows Wellsheet to provide a personalized experience patient by patient while being specialty agnostic. Wellsheet reduces physician time in the EHR by 40% and has a Net Promoter Score of 57. Cerner selected Wellsheet as one of only 3 finalists out of 65 partners for a Code Program Partner of the Year award at the Cerner Health Conference in October 2020.

KLAS' Points to Ponder



Mike Davis

HCIT market research and analysis expert with 40+ years of experience

The Positives: Physician frustration related to the EHR may be reduced with the Wellsheet application. Wellsheet eliminates the need for physicians to find data in the EHR. It presents relevant information with physician-tailored formats and uses machine learning (ML) to predict the data views that are important to the physicians. Additional capabilities for supporting rounding activities and monitoring resident interventions drive increased physician value.

Organizations should consider the following:

The Solution's Long-Term Viability in Healthcare

Healthcare organizations quickly implemented EHR solutions to capture meaningful use reimbursements. In most cases, the implementation process ignored the input of physicians and other clinicians relative to their delivery workflow needs. The focus of EHRs for delivering quality reports and supporting billing processes resulted in high rates of physician frustration in the industry. Solutions like Wellsheet that can integrate with an EHR and provide the physicians with key patient care data to improve care delivery workflows will protect EHR investments and improve physician satisfaction.

Impacts and Tradeoffs of the Underlying Technology

Wellsheet uses AWS for cloud services, Ruby on Rails and React for application development, and PostgreSQL and Amazon Redshift for databases. Mobile applications support iOS and Android devices using browser services. Currently, Wellsheet has no security certifications (e.g., ISO, NIST, HITRUST). Heroku Shield is used to provide data encryption for data in transit and at rest with AES-256 protocols. Existing EHR login authentication can be used to access Wellsheet from the EHR. EHR integration is established via FHIR API services, and HIPAA is provided via BAAs.

Team-Based Care Considerations

Wellsheet is well designed for giving physicians quick access to relevant EHR data. Value-based care is synonymous with team-based care. Extending EHR workflow efficiency views and tools to nurses and therapists will drive additional value for the EHR environment. The ability to identify care gaps with various patient handoffs and communicate those effectively to the clinicians will improve the quality of care as well as the outcomes. Solutions need to support all clinicians in all care settings.

Managing Patient Data Across the Continuum of Care

In many cases, large organizations may have more than one EHR implemented for acute and ambulatory care environments. Accessing multiple EHR data streams to provide a consolidated view of a patient's care across various modalities adds another value dimension. The predictive data views provided via ML algorithms will improve with additional data and with extended ML testing modules provided by different modalities of care. The data integration strategies should also be extended to HIEs. Wellsheet has established a big data environment to effectively process and manage this data.

REPORT INFORMATION

Reader Responsibility

KLAS data and reports are a compilation of research gathered from websites, healthcare industry reports, interviews with healthcare organization executives and managers, and interviews with vendor and consultant organizations. Data gathered from these sources includes strong opinions (which should not be interpreted as actual facts) reflecting the emotion of exceptional success and, at times, failure. The information is intended solely as a catalyst for a more meaningful and effective investigation on your organization's part and is not intended, nor should it be used, to replace your organization's due diligence.

KLAS data and reports represent the combined opinions of actual people from healthcare organizations regarding how their vendors, products, and/or services perform against their organization's objectives and expectations. KLAS findings are a unique compilation of candid opinions and are real measurements representing the feedback of interviewed individuals. The findings presented are not meant to be conclusive data for an entire client base. Significant variables—including a respondent's role within their organization as well as the organization's type (rural, teaching, specialty, etc.), size, objectives, depth/breadth of software use, software version, and system infrastructure/network—impact participants' opinions and preclude an exact apples-to-apples vendor/product comparison or a finely tuned statistical analysis.

We encourage our clients, friends, and partners using KLAS research data to take into account these variables as they include KLAS data with their own due diligence. For frequently asked questions about KLAS methodology, please refer to the KLAS FAQs.

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Note

The findings presented are not meant to be conclusive data for an entire client base. Performance scores may change significantly when additional healthcare organizations are interviewed, especially when the existing sample size is smaller, as in an emerging market with a small number of live clients.



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Our Mission

Improving the world's healthcare through collaboration, insights, and transparency.

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