



ValidationInstitute

2020 Validation Report

Review for: UberDoc

Valid through December 2021

Company Profile

Category: Digital Health Platform

Website: <https://uber-docs.com/>

Public or Private: Private for profit

Year Established:

CEO: Paula, Muto MD, FACS

Company contact:

Description:

UberDoc gives consumers access to physicians via an online platform.

UberDoc makes it easy for people to get care by offering priority in-person or telehealth appointments by not requiring referrals, and by having a flat rate price for visits. **UberDoc** physicians offer primary and specialty care, such as dermatology, pain management, and vascular surgery. See table for complete list.



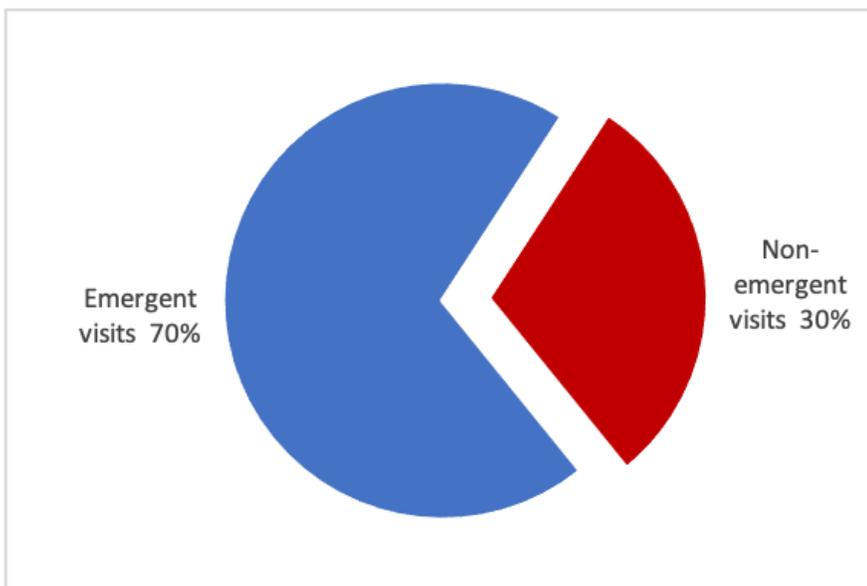
Table 1 Specialties and Number of Available Providers Offered by UberDoc

Specialty	# of providers available	Specialty	# of providers available
Addiction Medicine	70	Ophthalmology	100
Allergy and Immunology	30	Optometry	20
Bariatric Surgery	20	Oral Surgery	10
Breast Surgery	30	Orthodontist	10
Cardiology	80	Orthopedics	100
Colorectal Surgery	20	Pain Management	100
Cosmetic Dentistry	20	Pediatric Surgery	0
Dermatology	100	Pediatrics	120
Diabetes	40	Pedodontist	10
Digestive Health	10	Periodontist	10
Ear, Nose & Throat	60	Physical Medicine & Rehabilitation	40
Endocrinology	40	Plastic and Reconstructive Surgery	30
Endodontist	10	Preventive Medicine	50
Fertility	20	Primary Care	750
Foot and Ankle Surgery	100	Prosthodontist	10
Gastroenterology	60	Psychiatry	210
General Dentistry	100	Psychology	50
General Surgery	100	Pulmonology	40
Geriatrics	50	Radiation Oncology	5
Hand Surgery	30	Radiology	5
Hematology Oncology	10	Regenerative Medicine	20
Infectious Disease	30	Rheumatology	30
Interventional Radiology	10	Sleep Medicine	50
Nephrology	40	Spine Surgery	20
Neurology	60	Sports Medicine	100
Neurosurgery	30	Thoracic Surgery	5
Obesity Medicine	50	Urogynecology	10
OBGYN	120	Urology	60
Occupational Medicine	10	Vascular Surgery	20

As of January 2021

Claim Assertion for Validation

By making primary care easily accessible, UberDoc's program can reduce emergency care for non-emergencies. The relationship between primary care access and emergency room visits has been shown: Yoon et al found "More same-day access significantly predicted fewer non-emergent and primary care treatable ED visits." (Yoon & al, 2015) Estimates range from 10 to 30% of all emergency room visits could be avoided with improved primary care. (Uscher-Pines & al, 2013)



Up to 30% of Emergency Room visits could be avoided by making access to primary care faster. That is the goal of UberDoc's

Method / Calculation / Examples

Emergency Room visits can be categorized as non-emergencies based upon the illness that the patient presents. Each emergency room visit lists an illness as the primary (principal) one treated during the visit. A list of non-emergency diagnoses was taken from the Analysis of Emergency Department Use in Maine, a non-published study conducted by the Muskie School of Public Service. The analysis deemed a visit avoidable if the illness

- would in the majority of cases be non-emergencies,
- is frequently treated in primary care offices, and
- leads to a hospital admission for less than five percent of ER patients who get treated for the illness.

Using these criteria, the study produced the following list of diagnoses.

Table 2 Principal Diagnoses for Non-Emergent ED visits

Sore Throat
Viral infection (unspecified)
Anxiety (unspecified or generalized)
Conjunctivitis (acute or unspecified)
External and middle ear infection (acute or unspecified)
Upper Respiratory infections (acute or unspecified)
Bronchitis (acute or unspecified)
Asthma
Dermatitis and rash
Joint pain
Lower and unspecified back pain
Muscle and soft tissue limb pain
Fatigue
Headache

Note: if visits analyzed occur during 2020, the list should be adjusted.



The ER visits are included for all members of the health plan. The count of avoidable ER visits is the numerator; the count of eligible member months is the denominator. The rate is calculated for a pre-intervention period and compared to a post-intervention period. Pre- and post-intervention periods are at least 12 months.

Findings & Validation

The measure has not yet been applied.



Validation and Credibility Guarantee

UberDoc achieved level 3 validation for metrics. Validation Institute is confident that **UberDoc** performs as stated subject to the Limitations listed below and is willing to provide up to a \$10,000 guarantee as part of its Credibility Guarantee Program. To strengthen our offering and provide additional credibility around our service, the Validation Institute recently announced a Credibility Guarantee that offers customers of validated solution providers up to a \$25,000 guarantee. This guarantee confirms that a validated solution provider will, achieve what the validation language on a marketing claim says it will achieve.

Level 1 - Savings

Can produce a reduction of health care spend including the cost of the provider. Product/solution has produced, and replicated a lower cost for healthcare overall or a specific component of healthcare

Level 2 - Outcomes

Product/solution has measurably “moved the needle” on an outcome (risk, hba1c, events, employee retention, etc.) of importance.

Level 3 - Metrics

Claim is made that – with sourced, overridable assumptions linked to peer-reviewed or government sources

Level 4 - Contractual Integrity

No outcomes or savings has been shown, but vendor is willing to put a part of their fees “at risk” as a guarantee



Limitations

Though improved access to primary care has been shown to reduce non-emergency care in emergency rooms, this review is not based upon data from an **UberDoc**'s client. Depending upon how many people use **UberDoc**'s service and how many non-emergencies had been treated in emergency rooms, an employer's savings from the program will vary.

The diagnoses considered non-emergent might need to be adjusted, based upon symptoms of the coronavirus, such as sore throat or viral infection. These visits could be considered emergent during a public health emergency.

Works Cited

1. Uscher-Pines, L., & al, e. (2013). Deciding to Visit the Emergency Department for Non-Urgent. *American Journal of Managed Care* , 47 - 59.
2. Yoon, J., & al, e. (2015). The Relationship between Same-Day Access and Continuity in Primary Care and Emergency Department Visits. *PLoS ONE*.



Validation Expiration: December 2023

CERTIFICATE OF VALIDATION

Applicant:

UberDoc

2 McDonald Circle
Andover, MA 01810

Claim:

By making primary care easily accessible,
UberDoc's program can reduce emergency care
for non-emergencies

Validation Achieved:

Level 3 - Validated for Metrics

Validation Award Date:

December 2020

Linda Riddell
VP, Population Health Scientist
Validation Institute

Benny DiCecca
Chief Executive Officer
Validation Institute



About Validation Institute

Validation Institute is a professional community that advocates for organizations and approaches that deliver better health value - stronger health outcomes at lower cost. We connect, train, and certify health care purchasers, and we validate and connect providers delivering superior results. Founded in 2014, the mission of the organization has consistently been to help provide transparency to buyers of healthcare.

To strengthen our offering and provide additional credibility around our service, the **Validation Institute** recently announced a Credibility Guarantee* that offers customers of validated solution providers up to a \$25,000 guarantee. This guarantee confirms that a validated solution provider will, achieve what the validation language on a marketing claim says it will achieve.