COALITION FOR INNOVATION

HealthTech Blueprint for the Future

Coalition for Innovation, supported by LG NOVA

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The views and opinions expressed in the chapters and case studies that follow are those of the authors and do not necessarily reflect the views or positions of any entities they represent.

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Preamble

The Coalition for Innovation is an initiative hosted by LG NOVA that creates the opportunity for innovators, entrepreneurs, and business leaders across sectors to come together to collaborate on important topics in technology to drive impact. The end goal: together we can leverage our collective knowledge to advance important work that drives positive impact in our communities and the world. The simple vision is that we can be stronger together and increase our individual and collective impact on the world through collaboration.

This "Blueprint for the Future" document (henceforth: "Blueprint") defines a vision for the future through which technology innovation can improve the lives of people, their communities, and the planet. The goal is to lay out a vision and potentially provide the framework to start taking action in the areas of interest for the members of the Coalition. The chapters in this Blueprint are intended to be a "Big Tent" in which many diverse perspectives and interests and different approaches to impact can come together. Hence, the structure of the Blueprint is intended to be as inclusive as possible in which different chapters of the Blueprint focus on different topic areas, written by different authors with individual perspectives that may be less widely supported by the group.

Participation in the Coalition at large and authorship of the overall Blueprint document does not imply endorsement of the ideas of any specific chapter but rather acknowledges a contribution to the discussion and general engagement in the Coalition process that led to the publication of this Blueprint.

All contributors will be listed as "Authors" of the Blueprint in alphabetical order. The Co-Chairs for each Coalition will be listed as "Editors" also in alphabetical order. Authorship will include each individual author's name along with optional title and optional organization at the author's discretion.

Each chapter will list only the subset of participants that meaningfully contributed to that chapter. Authorship for chapters will be in rank order based on contribution: the first author(s) will have contributed the most, second author(s) second most, and so on. Equal contributions at each level will be listed as "Co-Authors"; if two or more authors contributed the most and contributed equally, they will be noted with an asterisk as "Co-First Authors". If two authors contributed second-most and equally, they will be listed as "Co-Second Authors" and so on.

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The Coalition is intended to be a community-driven activity and where possible governance will be by majority vote of each domain group. Specifically, each Coalition will decide which topics are included as chapters by majority vote of the group. The approach is intended to be inclusive so we will ask that topics be included unless they are considered by the majority to be significantly out of scope.

We intend for the document to reach a broad, international audience, including:

- People involved in the three technology domains: CleanTech, AI, and HealthTech
- Researchers from academic and private institutions
- Investors
- Students
- Policy creators at the corporate level and all levels of government

Chapter 8: Monetization Strategies

Authors: John Hsu, MD, John Barton

Overview

There has not been a digital health blockbuster/unicorn yet because universal reimbursement has not been established. There are some unique success stories but each story has been a hard-fought battle with insurers and employers that has – in most cases – taken years and does not offer enough return on investment (ROI) to warrant further investment for growth. For this reason, the environment for raising capital has become very difficult in the last five years. Companies that survived on federal grants are folding. The investors who were willing to wait for profits to develop using grant funds are moving onto other more glamorous sectors like artificial intelligence (AI).

Stakeholders

- Employers
- Insurers
- Government agencies
- Industry

Challenges / Gaps

Because universal reimbursement has not been established, HealthTech monetization requires navigating the complex stakeholder ecosystem while ensuring value delivery. Key considerations include:

- Insurance reimbursement
- **Regulatory compliance**: HIPAA, GDPR, and FDA regulations shape pricing and data usage.
- **Value-based care**: Aligning revenue models with patient outcomes and cost savings
- **Scalability**: Balancing affordability with sustainable growth
- **Equity**: Ensuring access for underserved populations to avoid exacerbating healthcare disparities

Monetization strategies must prioritize trust, transparency, and measurable impact to succeed in this highly scrutinized sector.

Our New Vision

The traditional fee-for-service models are shifting to strategies that derive recurring, diversified, and value-based revenue streams. We used to be able to buy complete software programs to use for years which limited growth potential. Now software is sold as a monthly or yearly subscription. This change from traditional software has been driven by the growth of advanced analytics, AI, and interoperable technology to create an ecosystem of integrated digital solutions. No single software package is a complete solution. The shift has come about by the explosive growth of data coupled with massive computing power which can evaluate voluminous amounts of data quickly. As the evolution of the third cycle of machine learning (ML) artificial intelligence, we have developed a huge demand for real-time insights.

New key monetization strategies include:

Data as a Service (DaaS) and Insights-as-a-Service

How it works: Companies offer a subscription to access anonymized, aggregated, and AI-ready healthcare datasets through data marketplaces or exchange platforms. These data products can be

licensed to pharmaceutical companies for clinical trials, research institutions for medical advancements, or insurers for risk assessment.

Examples:

Examples of DaaS:

- Amazon Web Services (AWS) and Snowflake AI Cloud for cloud analytics of large datasets
- Streetlight Data and Similar web for GPS traffic data
- MongoDB Atlas for relational database analytics in the cloud

Examples of insights-as-a-service:

- Experian, TransUnion, Equifax for credit scores and financial data
- ZoomInfo and Enigma Technologies for marketing analysis
- Cognism for customer information regarding sales and social media

Benefits: Insights to data can provide businesses the data to improve efficiency and sales, healthcare the data to improve predictive diagnostics, finance companies the data prevent fraud and risk assessment, and retail companies the data to increase sales to satisfy consumer buying preferences.

Challenges: With greater data comes greater responsibility.

- Data privacy and security: Compliance and regulations usually follow far behind so there is a constant threat for data intrusion and illicit use of data.
- Constant evaluation of data quality and integrations: With different database platforms and legacy systems, data corruption occurs, complicating database integration and resulting in incorrect conclusions.
- Interpretability and trust: Conclusions from data analytics may conflict with human intuition and common sense, which may make decisions difficult.
- Talent shortage: Machine learning, database cloud analytics, and cybersecurity are evolving very quickly. It can be difficult to find qualified up-to-date employees.

Leveraging advanced analytics and AI

How it works: Companies integrate analytics into internal operations to reduce costs and improve workflows through enhanced efficiencies and better patient outcomes. This indirect monetization strategy can lead to **revenue sharing of the savings.**

Examples:

- Predix is an AI driven platform that evaluates equipment to prevent downtime.
- Paypal uses an AI driven platform to analyze transactions to prevent fraud.
- Amazon uses an AI driven platform to follow purchase history and browser data to increase sales.
- IBM Watson Health uses an AI driven platform to evaluate treatment results to assist doctors in improving patient care.
- Walmart uses an AI driven platform to record purchase history, forecast demand, and manage inventory to reduce costs and meet customer demand.
- Tesla uses an AI driven platform to analyze real-time data from cameras to enable self-driving cars in traffic.

Benefits: The biggest advantage of data analytics within an AI environment is enhanced decision-making capabilities. Immediate improvements can be achieved in operational efficiency, risk mitigation, competitive advantage, predictions, and revenue growth because of greater data and accuracy of data.

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is a constant threat for data intrusion and illicit use of data.
- Constant evaluation of data quality and integrations: With different database platforms and legacy systems, data corruption occurs, complicating database integration and resulting in incorrect conclusions.
- Interpretability and trust. Conclusions from data analytics may conflict with human intuition and common sense which may make decisions difficult.
- Talent shortage. Machine learning, database cloud analytics, and cybersecurity are evolving very quickly. It can be difficult to find qualified up-to-date employees.

Integrated digital ecosystems

How it works: Medtech companies are moving beyond selling single products to offering integrated solutions. For instance, a subscription-based software ecosystem may combine hardware sales with analytics and developer access, creating multiple revenue streams.

Examples:

- Medtronic has Carelink, a platform to connect cardiac devices with AI driven analytics to promote remote patient monitoring.
- Stryker has Mako surgical systems to connect to Care.ai to make smart surgical suites and hospital wards.
- Siemens has AI-Rad Comparison to connect MRI and ultrasound systems to cloud based analytic and diagnostic systems to support radiologists.
- Johnson & Johnson has the Monarch robotic surgery platform for navigation and AI-Analytics to improve patient outcomes.
- BrightInsight has the BrightInsight Platform to integrate medical devices with digital health solutions to improve compliance.
- Benefits: Integrated solutions in the Healthtech/Medtech environment often leads to holistic care and operational efficiency. This data driven process can improve revenue growth, competitive advantages, patient care, and scalability; this is the future of medicine

Challenges:

- Integration complexity: Medical devices and software integration have been slow in adoption because of the lack of experience, secure and stable connectivity issues, computing power, and high development costs.
- Regulatory concerns: With the lack of data on use of combined hardware and software products, safety concerns loomed and resulted in a reluctance to grant approvals until data was produced.
- Adoption resistance: Doctors went to medical school, not engineering school. Their lack of knowledge and experience manifested as safety concerns and a reluctance to adopt new technology.
- Lack of data: Combining hardware and software into a new integrated system introduces new data that must be collected and evaluated. Inaccurate outcomes or unexpected results can undermine trust, adoption, and regulatory approvals.

Traditional Monetization Strategies

Subscription-Based Models

How It Works: Recurring fees (monthly or annual) for access to HealthTech platforms, tools, or services. Common in telehealth, remote monitoring, and wellness apps

Examples:

- Teladoc Health: Monthly or per-visit subscriptions for virtual consultations
- Headspace: Subscription for mental health and meditation content

Benefits:

- Predictable revenue stream

- Encourages user retention and long-term engagement
- Scalable across B2C and B2B markets

Challenges:

- High churn rates if perceived value diminishes
- Requires continuous feature updates to justify recurring costs
- Regulatory hurdles for data storage and sharing

Best For: Digital therapeutics, telehealth platforms, and patient engagement tools

Pay-Per-Use / Transactional Models

How It Works: Charges based on usage, such as per consultation, test, or data analysis. Often used in diagnostics or on-demand services

Examples:

- LabCorp OnDemand: Per-test fees for at-home lab kits
- Zocdoc: Per-booking fees for connecting patients with providers

Benefits:

- Low entry barrier for users hesitant to commit to subscriptions
- Aligns costs with actual usage
- Flexible for sporadic needs (e.g., one-off consultations)

Challenges:

- Revenue volatility due to inconsistent usage
- High competition in price-sensitive markets
- Complex billing systems increase operational costs

Best For: Diagnostic tools, appointment booking platforms, and episodic care services

Freemium Models

How It Works: Basic features are free, with premium features or services behind a paywall. Often used to build a large user base before upselling

Examples:

- MyFitnessPal: Free calorie tracking with premium nutrition coaching
- Fitbit: Free app with premium health insights via subscription

Benefits:

- Rapid user acquisition due to low entry cost
- Data collection from free users can inform product improvements
- Upsell opportunities for engaged users

Challenges:

- High cost of supporting free users
- Risk of low conversion rates to paid tiers
- Privacy concerns with data monetization

Best For: Wellness apps, fitness trackers, and patient education platforms

B2B Licensing and White-Labeling

How It Works: Selling or licensing technology to healthcare providers, insurers, or employers for integration into their systems. White labeling allows rebranding by the buyer

Examples:

- Cerner: Licenses electronic health records (EHR) software to hospitals
- Health Catalyst: Sells analytics platforms to health systems

Benefits:

- High-margin, scalable revenue from enterprise contracts
- Long-term partnerships reduce churn

- Aligns with B2B buyers' need for customized solutions

Challenges:

- Lengthy sales cycles and complex integration processes
- High upfront development and support costs
- Dependency on client renewals

Best For: EHRs, clinical decision support tools, and population health analytics

Value-Based Pricing

How It Works: Revenue tied to outcomes, such as reduced hospital readmissions or improved patient adherence. Often used in partnerships with payers or providers

Examples:

- Omada Health: Charges based on patient health improvements (e.g., diabetes management)
- Livongo: Revenue tied to cost savings for employers or insurers

Benefits:

- Aligns incentives with healthcare's shift to value-based care
- Builds trust with payers and providers
- Differentiates in competitive markets

Challenges:

- Requires robust data to prove outcomes
- Complex contracts and delayed revenue recognition
- Risk of non-payment if outcomes fall short

Best For: Chronic disease management, remote monitoring, and preventive care solutions

Data Monetization

How It Works: Aggregating and anonymizing health data to sell insights to researchers, pharma companies, or insurers. Must comply with strict privacy laws

Examples:

- Flatiron Health: Sells anonymized oncology data to researchers
- 23andMe: Monetizes genetic data for drug discovery partnerships

Benefits:

- High-margin revenue from existing data assets
- Supports innovation in drug development and public health
- Leverages data already collected for core services

Challenges:

- Stringent regulatory requirements (e.g., HIPAA, GDPR)
- Risk of consumer backlash over privacy concerns
- Requires significant investment in data infrastructure

Best For: Genomics, real-world evidence platforms, and large-scale health data aggregators

Hardware + Service Bundles

How It Works: Selling hardware (e.g., wearables, diagnostic devices) paired with software or service subscriptions for ongoing revenue

Examples:

- Apple Watch + HealthKit: Hardware sales paired with health app subscriptions
- Dexcom: Continuous glucose monitors with data analytics subscriptions

Benefits:

- Diversifies revenue across one-time and recurring streams

- Enhances user engagement through integrated ecosystems
- High margins on software/services post-hardware sale

Challenges:

- High upfront R&D and manufacturing costs
- Supply chain and regulatory complexities
- Competition from low-cost hardware providers

Best For: Wearables, medical devices, and home health monitoring systems

Employer-Sponsored Models

How It Works: Partnering with employers to offer HealthTech solutions as employee benefits, often funded or subsidized by the employer

Examples:

- Virgin Pulse: Wellness programs for corporate employees
- Castlight Health: Navigation tools to reduce employee healthcare costs

Benefits:

- Access to large, captive user bases
- Stable revenue through employer contracts
- Aligns with corporate focus on employee health and productivity

Challenges:

- Dependence on employer budgets and priorities
- Long sales cycles for enterprise deals
- Limited control over user engagement

Best For: Mental health platforms, wellness programs, and healthcare navigation tools

Hybrid Monetization Approaches

How It Works: Many HealthTech companies combine strategies to diversify revenue and mitigate risks. Hybrid models require careful alignment to avoid user confusion or perceived double-dipping.

Examples:

- Teladoc + Livongo: Combines subscription telehealth with value-based chronic care programs
- Fitbit: Freemium app, hardware sales, and premium subscriptions
- GoodRx: Transactional fees for prescriptions with data monetization for market insights. Hybrid models require careful alignment to avoid user confusion or perceived double-dipping.

Potential benefits (to providers, patients, self-help, insurance claims)

Overall benefits include improved better access for underserved regions, lowered risk of infection by avoiding clinics, enhanced chronic care management, faster submission, and more efficient reimbursement.

Specifically:

For providers: increased capacity, expanded reach, lower overhead, and improved workflow and care coordination, can improve documentation, patient management and practice revenues.

For patients: convenience, cost savings, access to specialists, improved chronic disease management, mental health support and continuity and engagement can lead to better outcomes for chronic care management

For insurers: streamlined processing, cost parity, fraud protection, lower overall costs, coverage

expansion, and simplified claims for covered services can lead to improved efficiency and lower operational costs.

Case Studies

Teladoc Health: Scaled through a mix of subscription and pay-per-use telehealth, with B2B contracts for employers and insurers.

Key lesson: Flexibility in pricing drives adoption across segments.

Flatiron Health: Monetizes anonymized oncology data while providing value to providers via analytics.

Key lesson: Ethical data use can unlock high-margin revenue.

Omada Health: Pioneered value-based pricing for diabetes prevention, aligning revenue with payer savings.

Key lesson: Outcome-based models require robust evidence.

Potential risks & mitigations

Monetizing digital health apps involves various strategies, each with potential risks and corresponding mitigations. Below is a concise overview of key risks and practical mitigations, focusing on privacy, user trust, regulatory compliance, and financial sustainability, tailored to the context of digital health apps.

Common Monetization Models and Specific Considerations

- **Subscriptions:** Risk of user churn if value isn't clear. Mitigate by offering flexible plans (monthly/annual) and free trials
- **In-App Purchases:** Risk of perceived "nickel-and-diming." Mitigate by bundling features into clear packages
- **Advertising:** Risk of privacy concerns or irrelevant ads. Mitigate by using contextual (non-personalized) ads and allowing ad-free upgrades
- **Data Licensing:** High privacy and ethical risks. Mitigate by limiting to anonymized datasets and securing user opt-in
- **B2B Partnerships:** Risk of misaligned incentives (e.g., insurers pushing cost-saving over care quality). Mitigate with strict partnership agreements and user-centric focus

Specific Security Risks and Mitigations

Privacy and Data Security Risks

Risk: Monetization models like data sharing or targeted advertising may involve collecting and processing sensitive health data, increasing the risk of breaches, unauthorized access, or misuse. Non-compliance with regulations like HIPAA (U.S.) or GDPR (EU) can lead to legal penalties and loss of user trust.

Mitigations:

- Implement robust encryption (e.g., AES-256) and secure data storage practices
- Obtain explicit user consent for data use, with clear, transparent privacy policies
- Anonymize or pseudonymize data before sharing with third parties
- Conduct regular security audits and vulnerability assessments
- Ensure compliance with HIPAA, GDPR, and other relevant regulations through legal consultation

User Trust and Engagement Risks

Risk: Aggressive monetization (e.g., excessive ads, paywalls for essential features) can alienate users, reduce engagement, or lead to app abandonment. Perceived exploitation of health

data may erode trust, especially in vulnerable populations.

Mitigations:

- Offer freemium models with core health features accessible for free, reserving premium features (e.g., advanced analytics, coaching) for paid tiers
- Use non-intrusive ads (e.g., opt-in or skippable) and avoid health-irrelevant promotions
- Communicate value clearly for paid features to justify costs (e.g., personalized health insights)
- Provide transparency about data usage and monetization practices via user-friendly dashboards or FAQs

Regulatory and Legal Risks

Risk: Monetization strategies may inadvertently violate health regulations, such as FDA rules for medical devices if the app provides diagnostic features, or advertising laws if claims are misleading. Partnerships with third parties (e.g., insurers, advertisers) may introduce liability risks.

Mitigations:

- Consult regulatory experts to classify the app (e.g., wellness vs. medical device) and ensure compliance with FDA, FTC, or equivalent bodies
- Vet third-party partners thoroughly, with clear contracts outlining data handling and liability
- Avoid exaggerated health claims in marketing; ensure all claims are evidence-based and substantiated
- Monitor regulatory updates, as digital health laws evolve rapidly (e.g., EU's Digital Health Data Space)

Financial and Market Risks

Risk: Over-reliance on a single monetization model (e.g., subscriptions) may fail if market demand shifts or competitors offer free alternatives. High development costs for compliance and features may strain finances if revenue is inconsistent.

Mitigations:

- Diversify revenue streams (e.g., subscriptions, in-app purchases, B2B partnerships with healthcare providers)
- Conduct market research to align pricing with user willingness to pay and regional economic differences
- Optimize development costs by prioritizing high-impact features and leveraging scalable cloud solutions
- Monitor competitor strategies and user feedback to adapt monetization models dynamically

Ethical and Equity Risks

Risk: Monetization may exclude low-income users if essential health features are paywalled, exacerbating health disparities. Sponsored content or biased algorithms (e.g., in mental health apps) may prioritize profit over user well-being.

Mitigations:

- Offer subsidized or free access for low-income users through partnerships with NGOs or government programs
- Ensure algorithms and content are vetted for bias and clinical accuracy by health professionals
- Prioritize ethical advertising, avoiding partnerships that conflict with health goals (e.g., promoting unhealthy products)
- Engage diverse user communities during development to ensure inclusivity

Next steps

Assess Your Monetization Strategy

Action: First identify the needs of the customer/patients. Without that information,

there's no way to tell if the product is a solution without a problem, determine which monetization strategy best fits your customer & market, or perform customer research.:

- Evaluate how or who would reimburse for the service or product
- Are there multiple potential customers to yield multiple revenue streams?
- Who are the competitors?

Action: Evaluate your current or planned monetization model (e.g., subscriptions, ads, data licensing, B2B partnerships) against identified risks (privacy, user trust, etc.).

- Create a risk-benefit matrix for each model, scoring factors like user retention, revenue potential, privacy impact, and regulatory complexity

Action: Conduct user surveys or analyze feedback (e.g., via app reviews, X posts) to understand user tolerance for costs and data-sharing

Timeline: 1–2 weeks.

Resources: Market research tools (e.g., SurveyMonkey), user analytics platforms (e.g., Mixpanel).

Strengthen Privacy and Security Measures

Action: Audit your app's data collection, storage, and sharing practices to ensure compliance with HIPAA (U.S.), GDPR (EU), or other relevant regulations.

- Engage a cybersecurity firm to perform penetration testing and vulnerability scans
- Update privacy policies to clearly explain data use in monetization (e.g., anonymized data for research)

Action: Implement or upgrade encryption (e.g., AES-256 for data at rest, TLS for transmission) and anonymization protocols

Timeline: 2–4 weeks for audit; ongoing for maintenance

Resources: Legal consultant specializing in health data, cybersecurity tools (e.g., OWASP ZAP)

Design a User-Centric Freemium Model

Action: Define core features to offer for free (e.g., basic health tracking, educational content) to ensure accessibility, reserving premium features (e.g., AI-driven insights, telehealth) for paid tiers

Action: Test pricing models with A/B testing to optimize conversion rates

Action: Develop non-intrusive ad options (e.g., opt-in, contextual ads) or an ad-free paid tier to balance revenue and user experience.

Timeline: 3–6 weeks for feature design and testing.

Resources: UX designers, A/B testing tools (e.g., Firebase).

Ensure Regulatory Compliance

Action: Consult a regulatory expert to classify your app (e.g., wellness vs. medical device) and align with FDA, FTC, or EU regulations

Action: If diagnostic features are monetized, prepare for potential FDA scrutiny by documenting clinical validation.

Action: Review marketing materials to ensure claims are evidence-based and avoid misleading health promises.

Timeline: 2–4 weeks for initial consultation; ongoing monitoring.

Resources: Health law firms, regulatory guidelines (e.g., FDA's Digital Health Center).

Build Ethical Partnerships

Financially, treatment is always going to be more profitable than cures. Getting beyond that mindset is either going to require a strong code of ethics, a customer base willing to pay for the best treatment available, or a major policy shift towards Universal Healthcare.

Action: Identify B2B partners (e.g., healthcare providers, insurers, research institutions) for monetization opportunities such as sponsored content or data licensing

- Draft contracts specifying data use, user consent, and liability to mitigate risks

Action: Avoid partnerships that conflict with user health goals (e.g., promoting unhealthy products).

Timeline: 4–8 weeks for partner outreach and agreements.

Resources: Legal team, industry networks (e.g., HIMSS conferences).

Enhance Transparency and Trust

Action: Create a user-facing dashboard or FAQ explaining how monetization works (e.g., "How we use your data" or "Why we charge for X")

Action: Launch a communication campaign (e.g., in-app notifications, email, X posts) to educate users on privacy protections and the value of paid features

Timeline: 2–4 weeks for content creation; ongoing for user engagement

Resources: Content writers, social media managers

Monitor and Adapt

Action: Set up key performance indicators (KPIs) to track monetization success (e.g., subscription retention, ad revenue, user churn) and user sentiment (e.g., NPS, app store ratings)

- Use analytics tools to monitor engagement and feedback in real-time.

Action: Regularly review competitor strategies (e.g., via X posts, web reports) and regulatory changes to stay agile

Timeline: Ongoing, with quarterly reviews

Resources: Analytics platforms (e.g., Google Analytics), competitor analysis tools (e.g., SimilarWeb)

Immediate Priorities

- Conduct a quick internal review of your app's data practices and monetization plans to identify glaring risks (e.g., non-compliant data sharing, aggressive paywalls)
- Draft a user survey to gauge preferences for monetization models and pricing
- Schedule a consultation with a healthtech legal expert to clarify regulatory requirements

Long-Term Considerations

- Explore grants or partnerships with public health organizations to subsidize access for low-income users, addressing equity concerns
- Invest in AI-driven personalization for premium features to increase perceived value, but ensure algorithms are transparent and bias-free

Conclusion

Finding the funding to launch any venture is hard enough, but health and medical products and services are particularly challenging. Within that space, digital health products are relatively new, making the task that much more difficult. And finally, the current investment climate is buffeted by economic uncertainty on a global scale, making funding that much harder to find.

But that does not mean that all development of new products and services will grind to a halt. A

good product that results in better outcomes, backed by solid science and a dependable business model will always have a chance for success. By careful consideration of the risks – and mitigations to reduce them – you can turn the odds in your favor.

Author (In order of contribution)

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Dr. John Hsu practiced 32 years in anesthesia, chronic pain, and addiction medicine. He holds 8 granted patents in medical devices and drug development and was awarded a $1.9 NIDA/NIH grant. Dr. Hsu founded: iPill inc. a biometric secure pill dispenser to improve remote medication adherence; Quivivepharma a drug development company for an opioid-respiratory stimulant combination pill to make opioids safe and abuse deterrent; Fentavive a drug development company for a Narcan-respiratory stimulant combination injectable to address Narcan dosing ambiguity and is in the early stages of working with the DOD/DARPA; NAOMI systems, a practice management software company.

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John Barton, Founder & Executive Director of the Spectrum Gaming Project, is an AI strategist and governance architect focused on building ethical systems for underserved markets. With a Master's in Counseling and decades in community education, he has delivered over 10,000 trainings in neurodiversity, education, and innovation. Based in Appalachia, his work has been recognized and adopted by the American Bar Association, the ACLU of West Virginia, AmeriCorps VISTA Leaders, and the WV Community Development Hub.

For more information about the Coalition for Innovation,
including how you can get involved, please visit coalitionforinnovation.com.

View the Next Chapter