

## Insurance & HealthCare Tidings- 9<sup>th</sup> December, 2011

### **Questionable Claims Up 7% in Q3\***

A comparison of third-quarter data from 2009, 2010 and 2011 reveals a notable increase in the number of questionable claims submitted, according to a new report issued by the National Insurance Crime Bureau, Des Plaines, Ill. In its third-quarter 2011 questionable claims (QC) referral reason analysis, the Bureau examined six referral reason categories of claims—property, casualty, commercial, workers' compensation, vehicle and miscellaneous—for the quarters listed above.

\*Source: <http://www.claimspages.com/news/questionable-claims-up-7-percent-in-q3/>

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### **Catastrophes cost U.S. property/casualty industry \$38.6B in nine months\***

Catastrophes cost the U.S. property/casualty insurance industry an estimated \$38.6 billion in losses during the first nine months of the year, A.M. Best Co. Inc. said Monday. That is an increase of 140% from the amount of catastrophe losses suffered by U.S. insurers during the same period in 2010, according to the Oldwick, N.J.-based rating agency. This year's nine-month estimated total is nearly double the \$19.6 billion in catastrophe losses sustained by U.S. insurers during all of last year.

\*Source: [http://www.claimspages.com/news/catastrophes-cost-us-property-casualty-industry-\\$38.6b-in-nine-months-best/](http://www.claimspages.com/news/catastrophes-cost-us-property-casualty-industry-$38.6b-in-nine-months-best/)

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### **UK Pet insurance fraud rises fourfold\***

Nothing, it seems, is immune to the impact of the economic slowdown: jobs, homes, businesses — now even the family pet. Cats, dogs and horses are facing deliberate injury — or even paying the ultimate price — as owners seek payouts from pet insurance policies. Fake claims on pet policies, which range from injuries inflicted by owners to claims related to non-existent pets, are now the fastest growing area of insurance fraud.

\*Source: <http://www.claimspages.com/news/pet-insurance-fraud-rises-fourfold/>

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### **BIG "I" COMMENDS HOUSE COMMITTEE ACTION ON THE "INSURANCE DATA PROTECTION ACT"\***

The Independent Insurance Agents & Brokers of America (IIABA or the Big "I") commended the U.S. House of Representatives' Financial Services Subcommittee on Insurance, Housing, and Community Opportunity for their support of the "Insurance Data Protection Act of 2011." This legislation, introduced by Rep. Steve Stivers (R-Ohio), would rein in the authority of both the Federal Insurance Office (FIO) and the Office of Financial Research (OFR).

\*Source:

[http://www.iiaba.net/na/02\\_News/02\\_PressRelease/NA20111208130859?ContentPreference=NA&ActiveState=0&ContentLevel1=NEWS&ContentLevel2=NEWSPRESS&ContentLevel3&ActiveTab=NA&StartRow=0](http://www.iiaba.net/na/02_News/02_PressRelease/NA20111208130859?ContentPreference=NA&ActiveState=0&ContentLevel1=NEWS&ContentLevel2=NEWSPRESS&ContentLevel3&ActiveTab=NA&StartRow=0)

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### **BIG "I" APPLAUDS SENATE PASSAGE OF FLOOD EXTENSION\***

The Independent Insurance Agents & Brokers of America (IIABA or the Big "I") praised the U.S. Senate for their passage of an extension of the National Flood Insurance Program (NFIP). The legislation keeps the NFIP running through May 31, 2012. The

legislation, introduced by Senator David Vitter (R-La.), passed the Senate by unanimous consent and must now be taken up by the U.S. House of Representatives to avoid the NFIP's scheduled expiration on Dec. 16.

\*Source:

[http://www.iiaba.net/na/02\\_News/02\\_PressRelease/NA20111207182552?ContentPreference=NA&ActiveState=0&ContentLevel1=NEWS&ContentLevel2=N\\*EWSPRESS&ContentLevel3&ActiveTab=NA&StartRow=0](http://www.iiaba.net/na/02_News/02_PressRelease/NA20111207182552?ContentPreference=NA&ActiveState=0&ContentLevel1=NEWS&ContentLevel2=N*EWSPRESS&ContentLevel3&ActiveTab=NA&StartRow=0)

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### **Chartis Obtains \$575 Million of Reinsurance Coverage\***

Chartis today announced that it has entered into a reinsurance transaction with Compass Re, which will provide \$575 million of protection to Chartis against U.S. hurricanes and earthquakes. This represents a substantial increase from the \$275 million of protection originally sought by Chartis. To fund its obligations to Chartis, Compass Re issued a catastrophe bond in three tranches – \$75 million of Class 1 notes, \$250 million of Class 2 notes and \$250 million of Class 3 notes.

\*Source: <http://www.claimsjournal.com/news/national/2011/12/07/196337.htm>

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### **VeriClaim Acquires Cramer, Johnson, Wiggins & Associates\***

T&H Global Holdings, LLC (T&H), a provider of specialized insurance claims services to insurance carriers, insurance brokers, corporations and public entities, announced that its VeriClaim, Inc. (VeriClaim) subsidiary has acquired Cramer, Johnson, Wiggins & Associates, Inc. (CJW), provider of loss adjusting and third party administration services (TPA) to the global property and casualty insurance market.

\*Source: <http://www.claimsjournal.com/news/national/2011/12/07/196394.htm>

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### **Rogue Physicians' Impact on Medical Malpractice Claims\***

Medical malpractice claims related to the conduct of rogue physicians are on the rise. According to a recent study published in the New England Journal of Medicine, most physicians can expect to face a malpractice claim by the age of 65 years. The report said that 75 percent of physicians in low-risk specialties and 99 percent of those in high-risk specialties were projected to face a claim.

\*Source: <http://www.claimsjournal.com/news/national/2011/12/06/196308.htm>

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### **Cat Losses Nearly Double Over 2010 Total Year-end Losses\***

Catastrophe-related losses experienced by the U.S. property/casualty (P/C) industry through the first nine months of 2011 have nearly doubled total year-end 2010 losses, according to the latest estimates from A.M. Best Co. The estimated total net pretax accident-year catastrophe-related losses during the first nine months of 2011 were \$38.6 billion, up \$22.5 billion, or 140 percent, from an estimated \$16.1 billion reported during the same period a year ago. Total net pretax accident year catastrophe-related losses in 2010, according to A.M. Best, were an estimated \$19.6 billion.

\*Source: <http://www.claimsjournal.com/news/national/2011/12/05/196205.htm>

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### **Markel to Acquire Program Administrator Thomco\***

Richmond, Virginia-based specialty insurer Markel Corp. is acquiring Thompson Insurance Enterprises, a national program administrator that does business as Thomco. Headquartered in Kennesaw, Georgia, Thomco manages 20 national programs including ones for medical transportation, senior living, childcare centers, fitness clubs, pest control operators, tanning salons and inflatable rental operators, among others.

\*Source: <http://www.insurancejournal.com/news/national/2011/12/07/226520.htm>

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### **Property Insurance Rates on the Rise\***

Nearly half of the U.S. property insurance policies renewed in the current quarter have been at higher prices, brokerage Marsh said on Friday, adding fuel to an industry turnaround after years of declining rates. Marsh said 48 percent of property policies renewed in the fourth quarter have been at a rate at least 1 percent higher. Nearly 20 percent of policies have been renewed at rate increases of more than 10 percent.

\*Source: <http://www.insurancejournal.com/news/national/2011/12/02/225861.htm>

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### **Aon to Close Agency Specialty Product Network (ASPN) by Year's End\***

Aon is closing down Agency Specialty Product Network (ASPN), a subsidiary, by the end of the year. "Aon values the long-term relationships developed with local agents and brokers and we remain committed to developing, underwriting and distributing specialty products and services tailored to agent distribution through our Aon Affinity and managing general underwriting businesses," said an Aon spokesperson, who confirmed ASPN's planned closing.

\*Source: <http://www.insurancejournal.com/news/national/2011/12/02/225965.htm>

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### **Do Actuarial Models Influence P/C Underwriting Cycle?\***

Property/casualty insurance is noted for the sharp rise and fall of its rates – the underwriting cycle. As actuaries have developed more sophisticated statistical and computer models to help understand complex insurance problems, what has been their effect on the underwriting cycle? Do the models flatten it or make it more volatile?

\*Source: <http://www.insurancejournal.com/news/national/2011/12/09/226706.htm>

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### **Professional Program Insurance Brokerage Launches Yoga Product\***

Professional Program Insurance Brokerage (PPIB) has set up a national program for yoga-related businesses. The product covers yoga practices, teachers and practicing students. A variety of coverages are available through the program, including claims-made coverage for general liability and products liability. There is also an option to add property coverage. The program also covers medical expenses, first aid, sexual misconduct and defendants/deposition fees, as well as license and disciplinary proceedings. PPIB can also cover worldwide retreats and speaking engagements.

\*Source: <http://www.insurancejournal.com/news/national/2011/12/08/226740.htm>

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### **70 Million Drivers Missing Out on Car Insurance Savings\***

More than 70 million drivers in the U.S. potentially are leaving car insurance savings on the table by not taking advantage of usage-based insurance programs that reward drivers who drive safely and during safe times of the day. More and more carriers are providing usage-based or mileage-based insurance options, including telematic systems or devices that monitor insured's driving and mileage habits.

\*Source: <http://www.insurancejournal.com/news/national/2011/12/08/226648.htm>

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### **Senate Approves Flood Insurance Extension to May 2012\***

The U.S. Senate passed an extension of the National Flood Insurance Program (NFIP) through May 31, 2012. The legislation, introduced by Sen. David Vitter, R-La., passed the Senate by unanimous consent and must now be taken up by the House of Representatives to avoid the NFIP's scheduled expiration on Dec. 16.

\*Source: <http://www.insurancejournal.com/news/national/2011/12/07/226616.htm>

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### **Crump Adds Personal Guarantee Insurance\***

Crump Insurance Services has launched personal guarantee insurance for business owners putting up their own personal assets against business loans. The product was built for small to medium-size businesses. The company will cover all types of industries, but Crump specifically designed it for established business owners with ongoing personal financial obligations, multiple partners guaranteeing a single-bank loan, commercial real estate investors and non-owner guarantors.

\*Source: <http://www.insurancejournal.com/news/national/2011/12/07/226592.htm>

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### **Medicare Drug Discount Saves Elderly \$1.5 Billion, U.S. Says\***

President Barack Obama's administration says the health-care overhaul he championed has this year saved Medicare recipients an average of \$569 a person in drug costs.

\*Source: <http://www.medicarenews.net/medicare-drug-discount-saves-elderly-1-5-billion-u-s-says-12-2011.htm>

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### **House GOP to propose pricier Medicare for rich\***

Making the rich pay more for Medicare is one GOP proposal to offset payroll tax cuts and unemployment benefits

\*Source: <http://www.medicarenews.net/house-gop-to-propose-pricier-medicare-for-rich-12-2011.htm>

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### **Time's up for Utahns enrolling in Medicare\***

Time's up for Utahns enrolling in Medicare by Patty Henetz the Salt Lake Tribune Published Dec 6, 2011 02:52PM MDT the Medicare deadline has arrived. People who don't want or need to make changes to their coverage can relax. But for the rest, Wednesday is the last day this year that eligible beneficiaries can change or enroll in Medicare, medigap, Medicare Advantage or Medicare Part D.

\*Source: <http://www.medicarenews.net/time%e2%80%99s-up-for-utahns-enrolling-in-medicare-12-2011.htm>

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### **Medicare to open database for ratings of doctors, hospitals\***

Picking a specialist for a delicate medical procedure such as a heart bypass could get a lot easier in the not-too-distant future.

\*Source: <http://www.medicarenews.net/medicare-to-open-database-for-ratings-of-doctors-hospitals-12-2011.htm>

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### **Medicare Pre-Payment Plan Limited to Florida, Group Says\***

A program to pre-approve Medicare hospital payments for pacemakers and joint replacements is limited to Florida, a U.S. doctor's group said.

\*Source: <http://www.medicarenews.net/medicare-pre-payment-plan-limited-to-florida-group-says-12-2011.htm>

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### **Medicare penalizes people who don't enroll when they become eligible\***

Throughout Robert Joseph's career, the Alvin, Tex., electrician always understood his health insurance policies. "I've never had a problem," Joseph says, "until I tried to sign up for Medicare." The chief reason: Joseph didn't sign up when he turned 65. He was still working, receiving health insurance from his employer.

\*Source: <http://www.medicarenews.net/medicare-penalizes-people-who-don%e2%80%99t-enroll-when-they-become-eligible-12-2011.htm>

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### **Medicare Will Cover Obesity Screening and Treatment\***

Medicare, which covers some 42 million American seniors, will pay for obesity screening and behavioral therapy as part of its portfolio of preventive services. About 72 million American adults, including about a third of Medicare recipients, are obese.

\*Source: <http://www.medicarenews.net/medicare-will-cover-obesity-screening-and-treatment-12-2011.htm>

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### **Medicare plan stirs confusion; HMO model unavailable in north state\***

Some north state doctors want to know why their names show up as network providers for a Medicare Advantage HMO plan being marketed by AARP.

\*Source: <http://www.medicarenews.net/medicare-plan-stirs-confusion-hmo-model-unavailable-in-north-state-12-2011.htm>

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### **Medicare begins Round 2 of DME bidding\***

Competitive bids for medical supplies are expected to save patients and the agency \$28 billion.

\*Source: <http://www.medicarenews.net/medicare-begins-round-2-of-dme-bidding-12-2011.htm>

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### **Insurer Highmark selling Medicare services\***

Health insurer Highmark Inc. says it is selling a Medicare services subsidiary to a Florida-based Blue Cross Blue Shield insurer to quell federal officials' concerns that its purchase of West Penn Allegheny Health System would represent a conflict of interest.

\*Source: <http://www.medicarenews.net/insurer-highmark-selling-medicare-services-12-2011.htm>

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### **High Level Of Waste In Health Spending, Says Medicare And Medicaid Boss\***

Dr. Donald M. Berwick, head of Medicare and Medicaid until last Thursday, stated that up to 30% of spending on health is wasted with absolutely no benefit to beneficiaries (patients). He added that his agency's cumbersome and archaic regulations are partly to blame. He claims too many resources and too much time is dedicated to things that do not help patients one bit; something doctors are fully aware of too.

\*Source: <http://www.medicalnewstoday.com/articles/238654.php>

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### **Total number of lapsed policies rose to 1.4 cr in FY11\***

The total number of insurance policies that lapsed in the public and the private sector rose to 1.40 crore during 2010-11 from 1.23 crore in the previous fiscal, Parliament was informed today. According to the Insurance Regulatory Development Authority (IRDA), the total (public and private) number of insurance policies that lapsed during FY 2010-11 stood at 1.40 crore, with an assured sum of Rs 1.58 lakh crore.

\*Source: <http://www.financialexpress.com/news/total-number-of-lapsed-policies-rose-to-1.4-cr-in-fy11-pranab/885936/>

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### **Oriental expects Rs 6,500 crore business this fiscal\***

Oriental Insurance Company (OICL) is targeting Rs 6,500 crore business this fiscal, a top official said on Thursday. In the next three years, it hopes to touch Rs 10,000 crore. "We are maintaining an annual growth rate of 16.5 per cent. Last year, we garnered business of approximately Rs 5,500 crore. Within the next 3 years we are hopeful of touching Rs 10,000 crore mark," OICL CMD, Mr. R K Kaul, told reporters here.

\*Source: <http://www.thehindubusinessline.com/industry-and-economy/banking/article2698166.ece>

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### **Bajaj Allianz's new unit-linked plan\***

Bajaj Allianz Life Insurance has launched a new unit-linked plan — Guaranteed Maturity Insurance Plan — that provides at maturity at least twice the value of single premium paid along with life cover. With minimum single premium at Rs 5,000, the product offers the lowest single premium ULIP in the country, thereby making the product affordable for all income segments.

\*Source: <http://www.thehindubusinessline.com/industry-and-economy/banking/article2698782.ece>

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### **IRDA slaps Rs 5 lakh penalty on NIC\***

The Insurance Regulatory and Development Authority has imposed Rs 5 lakh penalty on National Insurance Company Ltd for violation of certain norms. Acting on a complaint from a policyholder, the Authority found that the public sector general insurer had violated norms pertaining to policy proposal and repudiation of claim.

\*Source: <http://www.thehindubusinessline.com/industry-and-economy/banking/article2695662.ece>

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### **Free-look clause helps avoid mis-selling in health and life insurance policies\***

The biggest advantage of shopping for clothes, bags and accessories at outlets with a well-defined exchange or refund mechanism is the assurance of peace of mind. If the product fails to meet your expectations, you can always get it replaced or ask for a refund. A similar practice also exists in the insurance industry. Termed the 'free-look' clause, it was introduced by the Insurance Regulatory and Development Authority of India (Irdi) to provide succour to policyholders who have been victims of mis-selling.

\*Source: [http://articles.economictimes.indiatimes.com/2011-12-07/news/30486050\\_1\\_premium-life-insurance-policies-stamp-duty](http://articles.economictimes.indiatimes.com/2011-12-07/news/30486050_1_premium-life-insurance-policies-stamp-duty)

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### **Indian life insurance market least profitable in Asia: McKinsey\***

The Indian life insurance industry, which has been reeling under a slowdown due to a fall in new business premium collection over the last one year, is the least profitable market for its shareholders among all Asian countries, according to a McKinsey report. This observation has to be seen in the light of the insurance regulator's norms announced on December 1, which state that profitability is not a criterion for listing of life insurers on the bourses.

\*Source: <http://www.thehindubusinessline.com/industry-and-economy/banking/article2692453.ece>

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### **Bajaj Allianz Life launches guaranteed Ulip plan\***

Private insurer Bajaj Allianz Life Insurance today launched a new unit-linked plan — Guaranteed Maturity Insurance Plan (GMIP) — at maturity that will provide at least 200 per cent of the amount invested along with a secure life cover.

\*Source: <http://www.thehindubusinessline.com/industry-and-economy/banking/article2689097.ece>

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### **IPO guidelines fail to excite insurers\***

The recent Initial Public Offer (IPO) guidelines notified by the Insurance Regulatory and Development Authority to raise capital may not excite too many life insurance companies given the poor sentiment in the equity market and doubts on the possibility of getting good valuations. On the contrary, eligible insurers (for IPO) would rather want to dilute their stake in favour of their foreign joint-venture partners rather than test the volatile equity markets since last one year.

\*Source: <http://www.financialexpress.com/news/ipo-guidelines-fail-to-excite-insurers/884026/>

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### **IRDA to decide promoter stake dilution, foreign subscription in IPOs\***

The Insurance Regulatory and Development Authority (IRDA) on Thursday notified guidelines for life insurers to raise capital via initial public offering (IPO) or subsequent fund raising from the equity market with several riders relating to promoters' equity dilution and participation by foreign investors. IRDA will decide the size of the public issue, it said in a notification. As per the guidelines, promoters of the insurance companies will also be allowed to offload their stake in the company.

\*Source: <http://www.financialexpress.com/news/irda-to-decide-promoter-stake-dilution-foreign-subscription-in-ipos/883041/>

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### **Insurance Brokers Get No Love in Medical Loss Ratio Rule\***

The health-care overhaul law includes a provision requiring insurers to spend a certain proportion of premium dollars on patient care and quality-improvement programs. It all sounds straightforward enough — large-group plans must spend at least 85% and individual and small-group plans, 80% — but the devil is always in the details.

\*Source: <http://blogs.wsj.com/health/2011/12/02/insurance-brokers-get-no-love-in-medical-loss-ratio-rule/?KEYWORDS=Insurance>

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### **MetLife Expects Higher Profit in 2012\***

MetLife Inc. executives on Monday said profits were likely to rise in 2012, driven by improved results in its U.S. retirement-products business and its international operations. Executives expect the improvement to give the life insurer as much as \$7 billion of capital it could use on share buybacks and stock dividends if it is able to get approval from the Federal Reserve or restructure so that the Fed doesn't have veto power over its capital management.

\*Source: <http://online.wsj.com/article/SB10001424052970204903804577079993734378580.html?KEYWORDS=Insurance>

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### **APNewsBreak: NY spurs faster life insurer payouts\***

New York-based life insurance companies have paid out more than \$52 million so far in benefits nationwide after regulators urged the firms to make greater use of a regularly updated list of confirmed deaths compiled by the Social Security Administration, said state Financial Services Superintendent Benjamin Lawsky. Lawsky said Monday that most companies already had the "Death Master File," but they used the database only as a way to determine when the companies could stop paying annuities to policy holders.

\*Source: <http://online.wsj.com/article/APe04e4164834a493c901ad4e8d51085df.html?KEYWORDS=Insurance>

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### Swiss Re Sees Thai Flood Claims Costs At \$600 Million\*

Swiss Re said Tuesday it expected claims costs of \$600 million from the severe flooding in Thailand, higher than analysts expected and marking a costly end to a year that has been heavy on natural catastrophes, ranging from floods to earthquakes to a devastating tsunami in Japan in March. Swiss Re estimates claims costs for the industry to amount to around \$8 billion to \$11 billion.

\*Source: <http://online.wsj.com/article/SB10001424052970204770404577081703295323634.html?KEYWORDS=Insurance>

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### Business Insurance Rates Seem on the Upswing\*

After years of pain, the commercial insurance market seems poised to notch some gains. Travelers Cos. Chief Executive Jay Fishman, at a Goldman Sachs financial-services conference Tuesday, said his company had increased prices for business-insurance clients by 5.2% in October and 5.8% in November, the largest rates increases in several years.

\*Source: <http://online.wsj.com/article/SB10001424052970204770404577082343838256880.html?KEYWORDS=Insurance>

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### Aetna Sues Michigan Blue Cross Blue Shield\*

Echoing allegations made by the Justice Department last year, Aetna Inc. filed an antitrust suit against Blue Cross Blue Shield of Michigan, saying it struck anticompetitive agreements with hospitals that hobbled rivals. Michigan Blue Cross is fighting the Justice Department's antitrust suit, filed in October 2010. The new Aetna suit alleges Blue Cross paid hospitals more money if they agreed to boost to higher levels the rates they charged other health plans.

\*Source: <http://online.wsj.com/article/SB10001424052970204903804577083040737835150.html?KEYWORDS=Insurance>

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### Health-Insurance Refunds Tweaked\*

The Obama administration on Friday tweaked a piece of the 2010 health-overhaul law that requires insurance companies to spend most of their premium revenue on medical care. The rules are designed to prevent insurance companies from generating high profits while skimping on reimbursement for customers' medical treatments. Insurers have been required since the beginning of this year to spend a set proportion of their premium revenue on medical care, or prepare to issue rebates to consumers. The proportion—known as the "medical loss ratio"—is 85% for large groups, or 80% for individual and small-group plans.

\*Source: <http://online.wsj.com/article/SB10001424052970204397704577074620387082382.html?KEYWORDS=Insurance>

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### **Doctor uses iPad to re-program implanted cardiac devices\***

A Florida hospital has developed a system for wireless real-time monitoring and reprogramming of cardiac devices, including pacemakers and defibrillators, using an iPad. A doctor can suggest changes to a cardiac device's settings, and then relay the information for a nurse in the hospital to execute using a touch screen laptop.

\*Source: <http://mobihealthnews.com/>

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### **7 tips for health startups raising venture capital\***

Raising venture capital for a startup mHealth company is a difficult but not-impossible task, according to a panel of investors and industry watchers who discussed the subject at this week's mHealth Summit.

\*Source: <http://mobihealthnews.com/>

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### **Jawbone temporarily halts making UP, offers refunds\***

In response to criticism, Bluetooth headset maker Jawbone announced this week that it has temporarily ceased production of its Jawbone UP continuously-worn wristband sensor and created a full refund program for current owners. Purchasers of the \$99.99 UP device can receive a \$109.43 cash refund or \$150 in Jawbone store credit through a dedicated website, while still being able to keep their current UP device.

\*Source: <http://mobihealthnews.com/>

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### **Why the Qualcomm Life 2net launch matters\***

Qualcomm has been developing its wireless health strategy for the past decade –grooming health startups along the way, supporting a number of major mobile health events, co-founding various wireless health industry associations, and lobbying policymakers on the pertinent issues. That makes its announcement this week all the more important. It also means the industry should take note of its timing. Why now? Because, after a decade of planning, Qualcomm apparently thinks that the time is right.

\*Source: <http://mobihealthnews.com/>

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### **Investor: Payor plans to acquire 30 health startups\***

"Most [acquisitions] in healthcare get done between \$100 million and \$200 million," Radius Ventures Partner Dan Lubin told attendees at the mHealth Summit during a panel session this past week. "Most deals are under \$100 million — that is the exit... I think we can build companies, make them really attractive, and sell them to strategics for \$100 million. I think that's a four to [six year] time frame. If we want to build billion dollar companies — and healthcare has billion dollar companies [usually biotech and sometimes medtech] — well, that's going to take longer. It all depends on how much money you plow in and how long you are willing to wait."

\*Source: <http://mobihealthnews.com/>

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### **HIMSS: Most hospitals still developing mobile policies\***

How ubiquitous is mobility in healthcare? In a new survey from the Healthcare Information and Management Systems Society (HIMSS), just five of the 164 mostly hospital-based respondents said that no group of professionals in their organizations used mobile devices to access information necessary for their everyday activities. And just one was an organization with no plans to offer mobile access to IT systems.

\*Source: <http://mobihealthnews.com/page/2/>

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### **Mobile point-of-care spending to hit \$4.4B by 2015\***

Healthcare providers in the U.S. will spend more than \$4.4 billion on mobile point-of-care technology in 2015, up from almost \$2.8 billion in 2010, representing an annual growth rate of 9.9 percent, according to a new forecast from Intel and research firm IDC Health Insights. The market will expand slightly more rapidly in other Western countries. Counting North America and Europe, spending will increase by 10.5 percent a year, from \$4.4 billion last year to \$7.2 billion in 2015, including hardware, software and IT services.

\*Source: <http://mobihealthnews.com/page/2/>

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### **US Surgeon General pitches nationwide radio dance minutes\***

“We need to make healthcare more positive,” US Surgeon General Regina M. Benjamin told the audience at the mHealth Summit this week. Benjamin’s keynote focused on her enthusiasm for mHealth as a key tool in preventive care. She also announced a new developer challenge sponsored by the US Department of Health and Human Services (HHS): The Surgeon General’s Health Apps Challenge.

\*Source: <http://mobihealthnews.com/page/2/>

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### **FDA clears AgaMatrix’s iPhone glucose meter\***

On the last day of the mHealth Summit, Dr. William Maisel, the deputy director and chief scientist of the FDA’s Center for Devices and Radiological Health told attendees that today the FDA had cleared the first iPhone glucose meter. Maisel made the comment off-handedly, according to MobiHealthNews contributing editor Neil Versel, who was in attendance. Maisel also did not name the device or the company behind it.

\*Source: <http://mobihealthnews.com/page/2/>

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### **Health Q&A startup HealthTap raises \$11.5 million\***

At the mHealth Summit HealthTap announced that it closed \$11.5 million in its first round of funding after its \$2.5 million angel round this past March. The most recent round was led by Tim Chang of the Mayfield Fund, Rowan Chapman of Mohr

Davidow Ventures and former Google CEO Eric Schmidt through his Innovation Endeavors fund. The startup plans to use the funds to grow its platform's reach and recruit new employees.

\*Source: <http://mobihealthnews.com/page/2/>

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### **Leverage existing tech in developing world\***

The mHealth Alliance, a project of the United Nations Foundation, the Rockefeller Foundation and the Vodafone Foundation, is probably the most global of all the groups out there promoting mobile health. And the mHealth Summit, which the mHealth Alliance and the Foundation for the National Institutes of Health are staging this week, likely is the most international of mobile health events held in the U.S.

\*Source: <http://mobihealthnews.com/page/2/>

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### **Medicaid patients reduce hospitalizations with WellDoc\***

At the mHealth Summit George Washington University Center's Dr. Richard Katz presented findings of a demonstration program called DC HealthConnect. The program tested WellDoc's mobile health program DiabetesManager during a 12-month period. The results: DiabetesManager reduced ER visits and hospital stays by 58 percent on average compared to the previous year — when they weren't using the program.

\*Source: <http://mobihealthnews.com/page/3/>

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### **Childhood obesity study uses wearable sensors\***

As obesity increasingly becomes a worldwide epidemic, especially within children and adolescent populations, solutions to the problem are poised to become a major focus within mHealth. A handful of approaches were discussed during a panel, "Obesity, Diet, and Physical Activity," at the 2011 mHealth Summit held in Washington, D.C. this week, including a noteworthy study by a Canadian research team.

\*Source: <http://mobihealthnews.com/page/3/>

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### **CareFusion releases wireless EEG amplifier\***

CareFusion released its Nicolet EEG (electroencephalography) Wireless Amplifier this week, a device that captures high-resolution brain wave data and transmits it wirelessly to a monitoring computer. The device received FDA 510(K) clearance this past April.

\*Source: <http://mobihealthnews.com/page/3/>

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### **iPad app enables real-time tracking of catheterization procedure\***

An Israeli hospital has developed an app for iPads that provides staff, patients, and family members with real-time tracking of progress in catheterization and angioplasty procedures. The Invasive Cardiology Institute at Rabin Medical Center, located in the city Petech Tikvah in central Israel, will use iPads to enable the real-time tracking of the procedures.

\*Source: <http://mobihealthnews.com/page/3/>

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