

Predicts 2022: Connections Drive Healthcare and Life Science Business Model Change

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Initiatives: Healthcare and Life Science Digital Transformation and Innovation; Healthcare and Life Science Digital Optimization and Modernization

Healthcare and life science technologies continue to advance rapidly, highlighting the importance of ecosystem connections. CIOs can use these predictions to capitalize on new business opportunities – and defend against coming risks.

Overview

Key Findings

- New digital technologies are enabling healthcare providers to deliver hospital care at home.
- Consumers expect convenient care access with transparent pricing, driving demand for digital ecosystems that span payers, providers and life science organizations.
- Retailers are disrupting the employer-sponsored health insurance market, disintermediating health plans, concierge service providers and traditional provider network contracts.
- Digital product and ecosystem expansion is dramatically increasing cybersecurity risk.
- Virtual care access has become a matter of life or death amid pandemic-driven digital acceleration.

Recommendations

CIOs advancing healthcare and life science digital transformation and innovation should:

- Prepare for increasingly complex acute care services to shift from the hospital to the home by investing in digital capabilities that orchestrate workflows across multidisciplinary teams.
- Differentiate on consumer and partner experience by cultivating technologies that power personalized engagement with real-time service delivery sourced from across the ecosystem.
- Adapt to emerging needs for “co-opetition” relationships with unconventional entities like retailers and digital giants by embracing composable thinking, business and architecture principles.
- Protect revenue and manage brand reputation by advancing cybersecurity protection, such as by establishing a security framework that defines trust levels for digital products and partners.
- Address low-acuity care needs of low-technology usage communities by establishing local partnership networks to meet patients where they are to deliver potentially life-saving services.

Strategic Planning Assumptions

By 2025, 40% of healthcare providers will shift 20% of hospital beds to the patient’s home through digitally enabled hospital-at-home services, improving patient experience and outcomes and reducing the cost of care.

By 2025, a digital commerce platform and marketplace for healthcare services will connect 20% of all consumers, payers and providers.

By 2025, 10 major employers will disintermediate payers’ provider networks by contracting directly with a major retailer to deliver low-acuity care, chronic disease management and ancillary health and wellness services to employees.

By 2025, 75% of the top 20 life science organizations will suffer digitalization-related cybersecurity issues resulting in \$10 billion in lost revenue.

By 2023, public health officials will report that a lack of virtual healthcare access contributed to 5% of global deaths due to disease.

Analysis

What You Need to Know

In many ways, we now take for granted the rapid technology advances in healthcare and life science that the COVID-19 pandemic spurred. Virtual care, not long ago seen as a niche solution for rural consumers, now routinely supplants and augments in-person care. Modified RNA is now (almost) a household word, with new vaccines leveraging this transformational technology already in the works. With so much change so quickly, CIOs are often left wondering what's next. How can you as CIO weave these now advanced but still discrete technologies together into a cohesive IT strategy? And what will the next major round of technology developments mean for your organization?

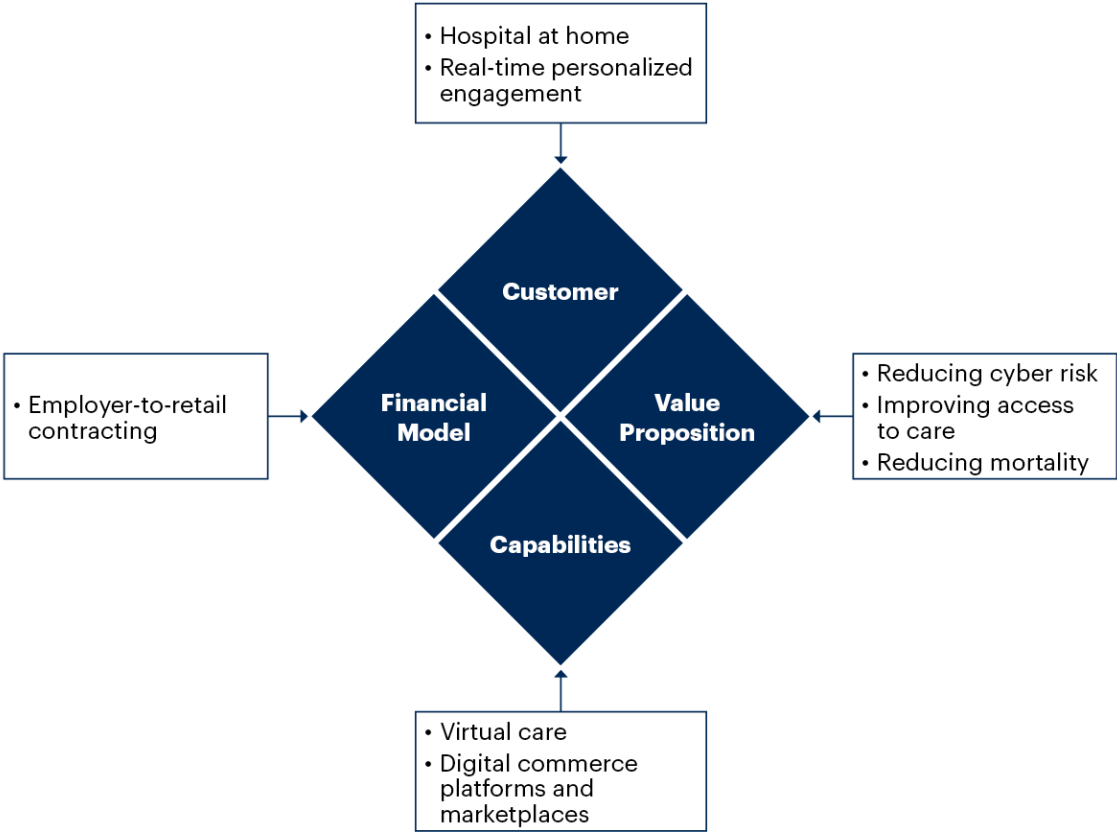
*A **business model** represents an organization's plan for generating revenue and making a profit or, in government, delivering value through its services. A business model explains what products or services the business plans to make and market, and how it plans to do so, the financial implications, and the business capabilities it will need.*

The key is to recognize that the emerging healthcare and life science business model is all about connection. How well you connect consumers with services and products – from both you and your partners – will determine the amount of meaningful health improvement you can deliver at scale. For example, it's no longer sufficient to manufacture a drug, prescribe a drug or reimburse for a drug. Instead, your value will be linked to how well that drug improves a consumer's health, and digital tools are key to efficiently engaging whole populations.

In this research, we present five new predictions about how the business model of connection will change the assumptions behind your IT plans (see Figure 1). Technology acceleration is a great thing for consumers, as seen in our predictions on hospital-at-home services and the coming of digital marketplaces. However, connections also bear risk. Our predictions on new contract relationships for payers, life science cybersecurity and lack of virtual care access highlight what you must do in an era of unrelenting health technology progress. Use this research to learn about the technologies that will change your approach and the specific actions to succeed.

Figure 1: Business Model Reflects the Value Your Organization Creates for Customers

Business Model Reflects the Value Your Organization Creates for Customers



Source: Gartner
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Strategic Planning Assumptions

Strategic Planning Assumption: By 2025, 40% of healthcare providers will shift 20% of hospital beds to the patient's home through digitally enabled hospital-at-home services, improving patient experience and outcomes and reducing costs.

Analysis by: *Sharon Hakkennes*

Key Findings:

- Hospital-at-home services consist of acute-level healthcare that is enabled by multidisciplinary teams, digital technologies and ancillary services, and is delivered in the homes of patients who would otherwise require admission to an inpatient facility. Evidence supports improvements in patient outcomes, reduced readmission rates and decreased costs. ^{1, 2}
- Hospital-at-home models of care have existed for decades with varying levels of adoption. Well-established programs exist in some geographies, such as Australia and England, and programs are emerging in other regions, such as the U.S. Regardless of geography, the pandemic has fueled global interest in this model, and is accelerating the development of new models of hospital-at-home care.
- Advances in virtual care technology are enabling higher acuity patients to be cared for at home and delivery of hospital-at-home models of care at scale.

Market Implications:

- The need for healthcare providers to increase bed capacity as well as patient concerns regarding the safety of attending hospitals associated with COVID-19 have been significant catalysts to adopting the hospital-at-home model. Many of the traditional barriers, such as clinician understanding of the relevance of the model and patient concerns about being cared for at home, no longer exist.
- Most significantly, changes in regulations and funding models are making hospitals at home a viable business model for many healthcare providers for the first time. For example, in the U.S., the Acute Hospital Care at Home program introduced by the Centers for Medicare and Medicaid Services (CMS) in November 2020 ³ provides an avenue for approved healthcare providers to obtain reimbursement of treatment of eligible patients in their home. By August 2021, more than 140 healthcare providers across 32 states had received approval under the program with the waiver expected to remain in place into 2022. ⁴

- For healthcare providers, establishing hospital-at-home services requires the development of new capabilities across clinical (such as home infusions and diagnostic testing) and logistics (such as delivery of medical supplies) domains. Healthcare providers must decide whether to build these capabilities internally or partner a third party to supplement their existing capabilities. Examples include, in the U.S., Mount Sinai's partnership with Contessa Health and, in Australia, Calvary Health's partnership with Medibank Private. Irrespective of how services are organized, the underlying technology platform supporting the program must enable seamless integration of information across the entire value chain.
- Technology advances, particularly in the area of remote patient monitoring, are dramatically changing the capacity to care for patients in their home. Medical-grade wearable biosensors are enabling the continuous collection and monitoring of a patients' physiological parameters. Applying analytics, artificial intelligence (AI) and machine learning (ML) to this data combined with subjective information collected from the patient, and data contained within the electronic health record (EHR) drives scale through clinical decision support. For example, through the alerting of clinicians to patients with early warning signs of deterioration and those who require urgent attention.

Recommendations:

- Ensure your virtual care technologies meet the clinical needs of hospital at home patients by working with clinical leaders to understand the digital capabilities required to support the acuity level of this patient cohort. Include evaluation of the solution architecture in terms of connectivity, data requirements and interoperability, and the ease of which target patient populations can engage with and use the technology in your procurement process.
- Build an underlying digital architecture that delivers a seamless clinician user experience by partnering with clinical informatics colleagues and third-party partners to map core clinical workflows and identify key information and integration requirements. The flow of clinical information across service lines is a must for minimizing clinical risk associated with transitions in care, as is the ability to access this information on any device for this highly mobile clinical workforce.

- Facilitate communication across the distributed multidisciplinary care team and operational support staff by deploying care team collaboration technologies that enable communication and collaboration on patient care in real-time. Ensure these technologies include capabilities to include the patient, their caregivers and family in their treatment and care.

Related Research:

[Accelerate Virtual Care Adoption Using the 5-Tier Approach to Virtual Care Services](#)

[Ace These Proof Points to Create a Sustainable Virtual Care Strategy](#)

[Clinical Communication and Collaboration System Core Capabilities](#)

[Market Guide for Virtual Care Solutions](#)

Strategic Planning Assumption: By 2025, a digital commerce platform and marketplace for healthcare services will connect 20% of all consumers, payers and providers.

Analysis by: *Barry Runyon*

Key Findings:

- Since 1995, Amazon has repeatedly and successfully disrupted and transformed the retail industry by offering extensive product choices, price transparency, convenient access, superior customer experience and guaranteed service levels. Amazon delivers via an innovative and extensible technology platform and through savvy partnerships and acquisitions. Only recently have these concepts taken root within the healthcare industry.
- Digital transformation within the healthcare industry began with arming physicians and nursing operations with enabling IT, most notably the EHR. Advances in mobility, interoperability, IoT, analytics and AI followed suit to optimize and augment the EHR platform. The healthcare industry is now in a post-EHR era. More and more care delivery will be enabled by digitally enabled workflows and business processes deployed outside the EHR.

- Retailers like Walmart and digital giants like Amazon continue to expand their reach into care delivery, putting pressure on providers to accelerate competitive offerings and business and technology partnerships. The world's most valuable companies operate ecosystem business models and IT platforms open for participation. They profit on the products and services sold, the data generated, and the value created by platform participants.

Market Implications:

- Conventional care delivery is not working for far too many consumers. 45% of adults under 29 and 25% of all adults don't have a PCP. ⁵ Insured adults are seeking less primary care as out-of-pocket health costs rise. ⁶ A healthcare industry where care is rationed and adjudicated almost entirely by payers and providers cannot meet the consumers' need for ready and convenient access to competent and affordable care to prevent, treat and cure illnesses.
- The future is provider-agnostic, on-demand care — a digitally enabled e-commerce marketplace where payers, providers and consumers participate. This emerging platform enables health systems to expand access to existing services and rapidly deploy new service lines concomitant with demand. This model may not be suitable or appropriate for all care delivery, at least initially, but is uniquely suited for delivering virtual care services.
- The inevitable shift to consumer-centric, federated, value-based care will force healthcare providers and payers to collaborate more closely and with an expanding ecosystem of business partners, many of which will be selected by the consumer.

Recommendations:

Prepare to participate in an emergent healthcare e-commerce platform and marketplace:

- Make it easy for the consumer to find you within the digital healthcare marketplace and quickly grasp your value proposition by investing in compelling, discoverable content about your clinical services, professional staff, quality of care, pricing, customer satisfaction, and other essential healthcare industry measures and benchmarks.

- Make it convenient for consumers to access your services and staff by investing in IT systems and technologies that engage and enhance your understanding of the healthcare consumer, their buying behavior, insurance coverage, and social determinants of health considerations. For example, next-generation contact centers, CRM and digital experience platforms.
- Make it operationally efficient, safe and secure for your business partners to do business with you by sharing data, and work through industry interoperability standards and protocols and trust arrangements.
- Increase the depth and breadth of your service offerings by forming collaborative relationships with local, regional and state healthcare providers – particularly your most respected and formidable competitors. Begin by strengthening and expanding digital care delivery capabilities such as virtual care and hospital-at-home services.

Related Research:

Emerging Digital Health Business Models Create the Need for Open Ecosystem IT Platforms

Hype Cycle for Healthcare Providers, 2021

Hype Cycle for Real-Time Health System Technologies, 2021

Hype Cycle for U.S. Healthcare Payers, 2021

Innovation Insight for Digital Health Platform

Strategic Planning Assumption: By 2025, 10 major employers will disintermediate payers' provider networks by contracting directly with a major retailer to deliver low-acuity care, chronic disease management and ancillary health and wellness services to employees.

Analysis by: *Kate McCarthy*

Key Findings:

- Major retailers like Walmart have advanced their position as value players in healthcare by including a robust continuum of products and services to manage acute and chronic conditions. With the addition of ancillary services, such as behavioral health, dental and optometry, and low-cost diabetes management products, their competitive pricing and convenient locations will appeal to consumers and employers.
- Large self-funded employers already directly contract with major hospitals, but continue to face escalating healthcare costs coupled with a need to differentiate in an increasingly competitive job market. To remain competitive while managing their costs, large employers are differentiating their benefits offerings with an emphasis on whole-person health.
- As employers become orchestrators of employee experience, with health and wellness as the core of their offering, payers risk being disintermediated by their large group employer customers.

Market Implications:

- Employers are increasingly looking beyond their payer partners to orchestrate employee benefits as they face unprecedented challenges in employee recruitment and retention. Robust, convenient, personalized health and wellness benefits are essential as they seek to build a differentiated employee experience. (See *Evolve Your EVP to a Human Deal by Creating Holistic Well-Being Offerings*.)
- Frustrated with a lack of cost and quality control when using payers' contracted networks, many large employers already contract directly with hospitals. For instance, Boeing and GE entered bundled payment agreements with Cleveland Clinic and Hospital for Special Surgery (HSS), respectively. Other large employers participate in groups like Purchaser Business Group on Health's (PBGH's) Employers Center of Excellence Network (ECEN) to provide their employees with access to centers of excellence. These relationships deliver high patient satisfaction and lower cost, and continue to expand. ⁷
- Consumer price transparency regulations will accelerate market changes that dilute the value payers provide large employers. This is because payers will no longer be able to hide their less-advantageous provider contract terms within the network wide average rate analyses typically given to employer groups.

- Meanwhile, Walmart is expanding its geographies as well as a wide continuum of convenient, low-cost healthcare products and services. As their offerings continue to expand, Walmart will find themselves competing with industry incumbents across the sector from providers, payers, retailers like Amazon and even life science companies.⁸ Employers will find the breadth, cost and convenience of Walmart's offering attractive, and they will seek to contract with Walmart to build on their goals of expanding value-based payments, employee wellness, and on-site clinics.
- For payers, Walmart is both a competitor and a potential partner in an ecosystem that necessarily includes frenemies to deliver value to large employers who demand differentiated value (see The Gartner Digital Ecosystem Framework: How to Describe Ecosystems in the Digital Age).

Recommendations:

- Become orchestrators of experience for employer customers and members. It will not be enough to simply coordinate care and process claims to satisfy the demands of large employers. Payers who fail to successfully orchestrate a high-value experience to their employers will find themselves increasingly disintermediated as employers directly contract for services they cannot obtain from their payers.
- Embrace cooptation with players like Amazon, CVS Health and Walmart in order to build comprehensive provider networks that include retail and ancillary services, such as behavioral health and dental, in addition to traditional healthcare offerings.
- Invest in composable core administrative and provider engagement technologies that will allow you to manage multiple provider networks and reimburse for non-claim services like community support at scale.

Related Research:

2021 Business Drivers for U.S. Healthcare Payer CIOs

Industry Vision: Health Value Management, U.S. Healthcare Payers' Next-Generation Transformation Strategy

Strategic Planning Presentation on the CARING Healthcare Payer

Hype Cycle for U.S. Healthcare Payers, 2021

How Digital Giants and Big-Box Retailers Are Advancing Consumer-Centricity and Virtual Healthcare

Strategic Planning Assumption: By 2025, 75% of the top 20 life science organizations will suffer digitalization-related cybersecurity issues resulting in \$10 billion in lost revenue.

Analysis by: *Michael Shanler*

Key Findings:

- Cybersecurity and information security spending and efforts are on the rise. Gartner research shows that 66% of life science CIOs are reporting this as a key technology area for the largest amount of new or additional funding in 2021 versus previous years. ⁹ (See 2021 CIO Agenda: A Life Science Perspective.)
- As life science companies experiment with new business models in which applications and private health data are shared in broader ecosystems, IT leaders have reacted with investments in privacy-enhanced computation and cybersecurity mesh to better manage the evolving threat landscape.
- Outcome-based metrics (ODMs) for security are often overlooked during aggressive digital strategy development.
- While the brand reputations of life science companies have risen during COVID-19, the increased urgency for digitization and the rapid switch to remote working have made the risk landscape more complex.

Market Implications:

- Ransomware attacks have become bigger and bolder, as more systemic gaps in security are exposed, especially in legacy companies. A recent report finds 10% of pharmaceutical manufacturers at high risk for ransomware. ¹⁰ Globally, billions of people rely on pharmaceutical companies to deliver quality therapeutics. If cyberattacks that recently affected meat packing plants, gas pipelines and entertainment firms happen in life science, then patients and consumers can be injured or even die. Obviously, leaking of sensitive patient, physician or sales channels and board meetings information represents potential catastrophes not only ethically and morally, but also to brand reputation. This is often characterized as a worst-case situation for life science CEOs.

- The IBM 2020 Cost of a Data Breach report found that the average total cost of a data breach was significantly higher for the healthcare and pharmaceutical industry compared to less regulated industries such as hospitality, media and research. ¹¹
- The business benefits of focusing on security to protect your brand are numerous. However, maintaining executive support will require continued vigilance as the world becomes more digitalized. CIOs must evolve cybersecurity practice and ODMs to directly tie operational outcomes of risk and security capabilities to the level of protection delivered. The number of critical vulnerabilities will rise, especially as more devices and partners become involved in your business ecosystem (see Outcome-Driven Metrics for Cybersecurity in the Digital Era).
- To improve the chances of securing ongoing executive support, (1) develop a clear and culturally aligned security vision, (2) develop outcome-driven security awareness metrics, and (3) focus on effectively communicating the business value. (See Take 3 Steps to Prove That Your Security Awareness Program Is Actually Working.)
- The revenue at risk in the pharma industry is staggering. Globally, worldwide pharmaceutical product sales are more than \$1.27 trillion – the top 10 drugs by worldwide sales in 2020 totaled nearly \$96 billion alone. ^{12, 13, 14} Meanwhile, several pharma companies are predicting double-digit growth in digital revenue over the next decade. A mere 1% hit on revenue due to cybersecurity issues easily puts the losses at nearly \$13 billion per year in 2020.

Recommendations:

- Factor in the new security threats for your partner ecosystem and model those risks to impacts against your brand by evaluating the threats that will come in through new data channels and ecosystem partners.
- Link security awareness training for new devices, sources, channels and players to measurable business benefits, such as brand protection, data integrity and compliance on securing personal information.
- Focus on security that can help protect with three levels of trust modeling. Launch a dedicated security team to focus on digital products and delivery, and prioritize investments using brand impacts as a weighting factor.

Related Research:

2021 CIO Agenda: A Life Science Perspective

Top Strategic Technology Trends for 2021

Managing Reputation Risk

Take 3 Steps to Prove That Your Security Awareness Program Is Actually Working

Hype Cycle for Cyber and IT Risk Management, 2021

Strategic Planning Assumption: By 2023, public health officials will report that a lack of virtual healthcare access contributed to 5% of global deaths due to disease.

Analysis by: *Mandi Bishop*

Key Findings:

- In 2020, researchers from the U.S. Department of Health and Human Services determined that communities with low internet access and computer use had a life span seven years less than communities with high use. These low-use communities are at an increased risk of mortality from chronic disease, poor general health and mental health as well as other conditions. ¹⁵
- According to the World Economic Forum, almost half of the world's population does not have internet access. ¹⁶ As of 2019, fewer than 20% of the internet users have broadband access. ¹⁷
- In many global regions during the course of the pandemic, many healthcare services shifted to telehealth access only. Primary and nonemergency care offices closed, and patients became dependent on telephone and internet connectivity to access clinicians.
- Virtual care adoption is correlated with age, local poverty level and urbanicity. Younger patients in higher-income, densely populated areas used telehealth disproportionately more than other populations – even though other populations may have more urgent or significant medical needs. ¹⁸
- According to the U.N. Secretary General in 2020, the digital divide affecting healthcare access is a matter of life or death and is “the new face of inequality.” ¹⁹

Market Implications:

- Health outcome inequities are exacerbated by the digital divide and will widen the mortality gap between communities with high and low technology access and use. Individuals without the essential access or education to utilize telehealth visits will effectively lose access to care, missing life-saving diagnoses and interventions. Health equity initiatives that rely on virtual care will expand the higher mortality rate associated with low technology usage.
- Efforts to close the digital divide by providing internet access options to rural and socioeconomically disadvantaged communities are receiving increasing support and funding around the world. However, broadband internet access is not the only barrier to the successful adoption of virtual care across all populations. Device access, language barriers, analog help availability, lack of digital identity for authentication, digital dexterity, health literacy and general education attainment also play significant roles and must be addressed in digital strategy.
- Disease prevention and treatment education are critical factors in reducing mortality rates. Disseminating this critical information using only digital communication channels means that low technology usage communities do not have the necessary decision support to help them make healthy choices.

Recommendations:

- Develop heat map mortality rates across communities at the lowest level of granularity possible to capture opportunities for deeper analysis of health outcome inequities that could be partially attributed to digital health adoption.
- Analyze technology usage disparities in the communities you serve, including broadband internet access and smartphone ownership. In some geographies, this data is available from public sources, whereas in others it will require an investment in commercial data vendors.
- Assess virtual care adoption rate differences across communities with high and low technology usage, as well as the types of services that users access.
- Identify gaps in care delivery and education service access patterns to determine where to focus intervention efforts.
- Collaborate with local resources including government agencies, internet service providers, community benefit organizations and educational institutions to develop a comprehensive strategy to address healthcare access and education inequities stemming from technology.

Related Research:

Maverick* Research: Reckless Digital Acceleration Fails – Digital Sensitivity Differentiates

Build a Data and Analytics-Enabled Public Health Command Center Platform for Pandemic Response

Digital Citizen Equity Index: How CIOs Can Increase Digital Engagement

A Look Back

In response to your requests, we are taking a look back at some key predictions from previous years. We have intentionally selected predictions from opposite ends of the scale – one where we were wholly or largely on target, as well as one we missed.

On Target: 2018 Prediction – By 2022, the first U.S. medical malpractice case involving a medical decision made by an advanced AI algorithm will have been heard.

When we made this prediction in 2018, the medical-legal complex was already gearing up for a new era of litigation involving patients harmed when receiving medical care in which AI was involved in the clinical process. Academic resources such as the *Journal of Medical Artificial Intelligence* and the *Harvard Journal of Law and Technology* noted the absence of AI-specific federal legislation, and speculated on how courts would apply existing legal concepts in determining liability in these cases. While even advanced AI use cases, like AI for diagnostic imaging, are years from mainstream adoption, experts in medical malpractice law (such as *The Doctors*) expect the volume of malpractice suits to follow a trajectory similar to other technology areas like the EHR and telemedicine. That leaves little doubt that malpractice cases involving AI, though not yet disclosed to the public, are already in proceedings.

Missed: 2019 Prediction – By 2024, Amazon, Berkshire Hathaway and JPMorgan Chase's super-integrated coverage offering will reduce their collective employee healthcare costs by 15% from the year prior to its launch (and increase payer CEOs' anxiety by 100%).

The Haven joint venture between Amazon, Berkshire Hathaway and JPMorgan Chase had a unique opportunity to redefine healthcare access and affordability but instead disbanded in January 2021. During its three years of operation, participating entities launched their own initiatives to address employee health – such as Amazon Care – and there was little market evidence of cohesive strategy development or execution. Haven experienced a high rate of executive and skilled technical resource turnover, including CEO Atul Gawande, who had been heralded as a visionary on a mission to transform healthcare.²⁰ Ultimately, these organizations' inability to collectively think and execute outside their respective comfort zones was the downfall of what could have been a truly disruptive market force.

Evidence

¹ Hospital-Level Care at Home for Acutely Ill Adults, American College of Physicians.

² Hospital-at-Home Interventions vs In-Hospital Stay for Patients With Chronic Disease Who Present to the Emergency Department, JAMA Network.

³ CMS Announces Comprehensive Strategy to Enhance Hospital Capacity Amid COVID-19 Surge, Centers for Medicare & Medicaid Services (CMS).

⁴ Hospital-at-Home Gains Traction, Pharmacy Practice News.

⁵ Declining Numbers of Americans Have a Primary Care Provider, Reuters.

⁶ As Out-Of-Pocket Health Costs Rise, Insured Adults Are Seeking Less Primary Care, NPR.

⁷ Why GE, Boeing, Lowe's and Walmart Are Directly Buying Health Care for Employees, Harvard Business Review (HBR).

⁸ How Walmart and Amazon's Healthcare Moves May Affect ASCs, Becker's ASC Review.

⁹ 2021 Gartner CIO Survey. This survey was conducted online from 14 July 2020 through 14 August 2020 among Gartner Executive Programs members and other CIOs. Qualified respondents are each the most senior IT leader (CIO) for their overall organization or a part of their organization (for example, a business unit or region). The total sample is 1,877, with representation from all geographies and industry sectors (public and private), including 46 from life sciences. The survey was developed collaboratively by a team of Gartner analysts, and was reviewed, tested and administered by Gartner's Research Data and Analytics team. Results do not represent "global" findings or the market as a whole but reflect sentiment of the respondents and companies surveyed. This report focuses on the answers from life science respondents (n = 46) and provides comparison to other industries as well as life science "top performers."

¹⁰ The 2021 Ransomware Risk Pulse: Pharmaceutical Manufacturing, Black Kite.

¹¹ Cost of a Data Breach Report 2020, IBM Security.

¹² Global Pharmaceutical Industry – Statistics & Facts, Statista.

¹³ The Top 20 Drugs by Worldwide Sales in 2020, Fierce Pharma.

¹⁴ Leading Pharmaceutical Products by Sales Worldwide in 2020, Statista.

¹⁵ Digital Divide: Marked Disparities in Computer and Broadband Internet Use and Associated Health Inequalities in the United States, International Journal of Translational Medical Research and Public Health.

¹⁶ Coronavirus Has Exposed the Digital Divide Like Never Before, World Economic Forum.

¹⁷ Internet, Our World in Data.

¹⁸ Who Is (and Isn't) Receiving Telemedicine Care During the COVID-19 Pandemic, RAND Corporation.

¹⁹ Disparities in Health Care and the Digital Divide, Springer.

²⁰ Two Years of Halting Progress and High Turnover Preceded Atul Gawande's Exit as Haven CEO, STAT.

Recommended by the Authors

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Hype Cycle for Digital Care Delivery Including Virtual Care, 2021

Hype Cycle for U.S. Healthcare Payers, 2021

Industry Insights: Healthcare Providers Must Modernize to Transform

2021 Business Drivers for Healthcare Provider CIOs

Healthcare and Life Science Business Driver: Strategic Technology Change

Healthcare and Life Science Business Driver: Uncertainty

Healthcare and Life Science Business Driver: Medical Technology Innovation

Emerging Digital Health Business Models Create the Need for Open Ecosystem IT Platforms

Quick Answer: How Will Leading Healthcare Payer CIOs Deploy Transformative Technologies In a New Business Model?

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