UNITE US

"What we're solving is not just a medical problem; ultimately, it's an American problem that comes from all sectors" – Dan Brillman, Founder & CEO, Unite Us (1)

By Lexi Henkel

Unite Us provides critical infrastructure to connect the health and human services ecosystem. Through software, Unite Us enables cross-sector communication, coordination, and collaboration. They bring together clinical providers, government agencies, health plans, social service providers, and other community partners on a common technology platform to help address the social determinants of health so that the right care is delivered at the right time, in the right place. Preventative social services, such as housing and food, reduce inappropriate utilization in the clinical setting; by combining cross-sector collaboration infrastructure with the unique data insights it captures, Unite Us is able to drive better health outcomes and reduced healthcare spend, while stripping administrative waste out of the system. Unite Us software users have engaged with over 30 million Americans, helping them receive better care through software-enabled collaboration.

VALIDATING THE NEED

10 years ago, Unite Us started with a simple mission: to help veterans connect the dots between their fragmented health and social service benefits. Co-founders Dan Brillman and Taylor Justice, both veterans themselves, saw problems with the existing system first-hand.

After returning home from his final combat deployment as a Military Pilot in the US Air Force Reserve, Dan enrolled in Columbia Business School in 2012. He was quickly inundated with requests from fellow veterans to help them navigate their health and social services benefits. Initially, Dan assumed that fellow veterans' needs could be met effectively through existing government and healthcare channels. But what Dan assumed was a coordinated effort between health and social services, was actually much more fragmented than he could have possibly imagined. There was little to no coordination between the medical world (notably the Veterans Association, or the VA), government services benefits, and the wide array of social services offered to veterans, such as employment training and housing. The system was broken.

In 2013 Dan raised initial funding and teamed up with co-founder Taylor Justice. "We came to the conclusion that we need to solve this [problem] with technology in order to really change the landscape of how service providers communicate and address people's health outside of the four walls [of traditional medical care]." They spent months interviewing potential customers about the problems they faced addressing the unmet social needs of veteran populations. "We saw the need for [our solution] 5-10 times before we said, 'this is real; from day one people already want to buy this.' We didn't need to go out and convince someone of the need." Service providers and government agencies needed the ability to connect with other parties operating outside of their workflows.

1 JPM Healthcare Conference Company Presentation

However, while the system was clearly broken, there was no established market for software that connected these types of social service agencies and clinical providers. In effect, Unite Us would be creating a new category, which required iterating on economic and user engagement models. Unsurprisingly, it wasn't all smooth sailing. Before landing on the final product, Dan and Taylor built a consumer-facing software platform, which they ultimately shut down in favor of a B2B solution.

Unite Us built a software product to address an acute market need, providing real-time connectivity and predictive data analysis in order to improve health outcomes for veterans. What started as a solution for veterans ultimately became a solution for all Americans. The results speak for themselves: (2)

- **$1.1M** est. healthcare savings across 871 households
- **63%** reduction in unhealthy days
- **72%** increase in primary care appointment show rate
- **34%** reduction in ED utilization
- **25%** increase in behavioral health access, 24% decrease in ED utilization

BUILDING A SCALABLE MODEL

Unite Us launched in 2014 with one customer, the Institute for Veterans and Military Families (IVMF) at Syracuse University, and a local network of health and social service providers that they stitched together on Unite Us software. Reflecting on this, Dan says, "[Software] was a different game to play compared to how people previously provided services. This hadn't been done at scale and in a way that brought sectors together; it was a very hard problem to solve." The Unite Us model is rooted in onboarding local clinical and social service providers, but done at scale across the nation. As Dan says, Unite Us is "built at the speed of trust."

Scaling is still a local game, but Unite Us seems to have mastered it. From 2020 to 2022, (3)

One of the most important contributors to the company's rapid scaling was its disciplined focus. "Today, Unite Us serves major governments, health plans, and hospitals...but we didn't start there. We started by really focusing on the military connected community (VA and big corporations supporting veterans) and ensuring we nailed the experience," Dan says. In fact, Unite Us served only veterans for the first seven years of its operations.

Dan and Taylor identified a specific population (veterans) and spent a long time creating a market and building a product that met the needs of this population. They identified customers who were eager and willing to buy their product. They developed a model for secure data exchange and determined the best way for social services to adopt software and workflows. Through repetition and focus, they were able to enter new markets quickly and effectively.

Expanding from veterans to other populations was a natural extension of Unite Us's core technology: "We still sell software today, but it's been about expansion of that software use. We saw many organizations outside of the veteran population wanting this type of solution, including Kaiser Permanente and other government agencies." Today, Unite Us serves over 600 customers, with revenues growing at a 140% compound annual growth rate (CAGR). (4) 33 million Americans – veterans and non-veterans – rely on Unite Us to help them access high quality care across a wide spectrum of services.

Unite Us has relied on venture capital funding to operate and grow. This was no easy feat at first: "Investors weren't ready to fund this. It's uncomfortable to invest in an n-of-1 solution, in a new category." As a result, Dan and Taylor knew they had to be capital efficient from the start, and only raised $10 million in their first eight years of

2 Internal Unite Us customer case studies
3 JPM Healthcare Conference Company Presentation
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operation. They also aligned their business needs with the expertise of each of their partners. Initial seed funding came from Scout Ventures, a Venture Capital firm focused on founders from the military, intelligence, or national labs. "When we went from the veterans market to selling into healthcare, we needed a healthcare investor. Then we got that right and moved into government cross-sector enterprise software, so we needed an investor who knew that at scale." Dan emphasizes the importance of knowing when to raise (and not rushing this) and with whom to partner based on alignment of expertise and time horizons. When choosing capital partners, Dan and Taylor seek investors with long-term mindsets: "We're looking to make generational change, not just 2023 change."

FINDING MARKET SUCCESS

In the first few years of operations, Dan and Taylor spent a lot of time exploring the question most healthcare companies struggle to answer, "Who will pay for our product?" This question was particularly important for Unite Us because they were creating a new market. Finding a financial model that aligned incentives between clinical and social service providers was difficult. These industries were used to working together via phone calls and favors.

In order to incentivize software adoption and align payment to value, Dan and Taylor landed on an enterprise software subscription (SaaS) model for its paying customers (healthcare and government) and no-cost software licenses for community partners. The market has matured over the last decade, with regulators now promoting new economic and data relationships between health and social service providers. In just the last five years, there has been a wave of new regulations and reimbursement pathways promoting health equity and addressing upstream social determinants of health (e.g., new mandated screening requirements, CMS-mandated outcomes-tracking, novel reimbursement pathways for non-medical care).

Notably, some states now mandate the provision and reimbursement of nontraditional services to manage whole-person health over time.

However, the market is still nascent. Dan explains, "We had to push on where budgets were coming from. Just because the law exists doesn't mean [customers] know how to buy it (get reimbursed for these services)." Dan and Taylor have spent years guiding customers through their own RFPs and procurement processes. What started with 10-15 RFPs per quarter has grown to 100-200.

CULTIVATING A MISSION-BASED CULTURE

Despite their military training, or perhaps because of it, Dan and Taylor have cultivated a corporate environment of openness and empowerment. Dan explains, "Our principal value is to be a good human. Not one job in this company is easy - everyone needs to believe in the mission and where we're going."

He emphasizes his own openness to ideas and feedback: "I set the vision, but I solicit feedback from [our employees]. People feel empowered here." Dan also emphasizes communication: "Ultimately, my job is to make sure people feel like they are in the know and know the why."

Furthermore, Unite Us recognizes the importance of having their team represent the local communities they serve: out of 850 employees, a couple hundred were hired from the communities in which they serve, and currently work in those communities. This has proven critical to scaling local networks of providers: "The local game is a hard game to play. There are existing relationships, pushback, and change management. It's hard to change human behavior - that is our job as a company, our obligation to take that on." Built at the speed of trust.

Validate your need first, the economics second.
"Getting clear on the problem is the first step. Luckily, we had time to build something [that didn't work] and be able to scrap it. But the problem is the same 10 years later, even now that we're serving 33 million people." – Dan Brillman

Start small, and nail it before you scale it.
We focused on the military population for a long period of time and got the model and the technology right, before expanding to selling to big governments and health plans. We figured out the model and how data can be exchanged securely, how social services can use software and workflows; we did that with little capital funding. It requires capital to capture larger opportunities. If I were to play it back again, I would have done the same exact thing. I wouldn't have tried to move too fast without the market being there - we could have built point solutions all day and they would have failed." – Dan Brillman

Stay focused; don't try to be everything all at once.
"As a company, you can only pick a few things to do really well. We're a technology company providing software. We don't need to buy physician groups to change behavior; that's not what our company does." – Dan Brillman

Don't be afraid to create a new market.
"There was no market for this. Investors didn't want to fund it. Now it's being procured everywhere as a standard." – Dan Brillman

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