

4sight Health Roundup Podcast
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Lingering Lessons Five Years After COVID

David Burda:

Welcome to the 4sight Health Roundup podcast, 4sight Health's podcast series for healthcare revolutionaries, outcomes matter customers count and value rules. Hello again, everyone. This is Dave Burda, news editor at 4sight Health. It is Thursday, March 20th. Five years ago today, March 20th, 2020, Illinois Governor JB Pritzker issued a stay at home order to help stop the spread of the deadly COVID-19 virus in the state. The order was effective at 5:00 PM on Saturday, March 21st. After then, president Donald Trump fumbled the pandemic response in the US. More than 1.2 million people have died from Covid, more than any other country in the world. Aren't you glad he's president again? How soon we forget bleach and light bulbs, I can't change that, but what has changed is us and the US healthcare system, how we've changed is what we're gonna talk about on today's show with Dave Johnson, founder and CEO 4sight Health, and Julie Murchinson, partner at Transformation Capital. Hi Dave. Hi, Julie. How you two doing this morning, Dave?

David W. Johnson:

Survived Pie Day, the odds of March and St. Patty's Day now onto April Fool's Day. It's amazing how we human beings amuse ourselves. <Laugh>

Burda:

Julie, how are you?

Julie Murchinson:

I am great. I just wish I'd been in Boston this week because Ed Sheeran showed up and played at a bar. Did you see that?

Burda:

Oh, wow. I did not hear that. That'd be pretty cool. Cool. That is very cool. Okay, before we talk about the fifth anniversary of COVID, let's talk about another milestone today. It's the first day of spring. Dave, tell me it's spring without telling me. It's the first day of spring.

Johnson:

The air is fresher, the days are longer and warmer, and I just heard a gaggle of Canadian geese honking as they're flying north. At least the ones that don't hang around here all year.

Burda:

<Laugh>. That is so true. It's a good place. Good place for geese to live, isn't it? Julia, how about you? How do you know it's spring?

Murchinson:

Well, in Seattle, it's a little bit of a different story. You know, we have flowers blooming in our garden, and then we had a massive hailstorm two days ago, so that's pretty much spring here. <Laugh>.

Burda:

Yeah, no, nothing says spring like a photo of tulips with snow on 'em, right?

Murchinson:
That's right.

Burda:
For me, I saw the fattest robin, I think I've ever seen basically a big feather ball with a tiny big, two tiny feet and a tail. So baby robins can't be too far behind <laugh>. Okay. Let's talk about the five year anniversary of the start of the COVID-19 pandemic. I'm gonna ask each of you the same three questions, more philosophical than analytical. Over the past five years, how did Covid change you? How did Covid change society, and how did Covid change the healthcare system, kind of like Man versus himself, Man versus society and man versus man kind of a thing. Dave, how would you answer those three questions?

Johnson:
How did it change me personally? Well, probably the biggest thing was I used to be a real road warrior, traveling two, three days a week, and obviously with Covid all the travel shut down. And it turned out I didn't really like to travel as much as I thought I did. So probably the most enduring lesson from Covid for me is I've got a much higher threshold for when I go hop on a plane and, and get outta town. Other things you know, I, I think our television viewing habits just completely turned upside down. We cut our cable cord. We learned about this concept called bingeing. And I don't know, <laugh>, it seemed still kind of going on, not, maybe not quite as crazy as it once was. I think we all got very comfortable with with Zoom meetings. And that's obviously become a big part of, of business activity. Now, what was fun during Covid was, for a while at least, we were doing kind of getting reacquainted zoom calls, college friends, family various different groups where we'd all kind of get together and do updates and so on. And it was funny how that just kind of all petered out after about nine months or a year, you know, we were all excited about it, and then it just didn't happen anymore. I, you might remember, I experimented with writing song parodies

Burda:
Right.

Johnson:
Obamacare is here to stay.

Burda:
I'll never forget that, that's for sure.

Johnson:
And if it's possible, Terry and I actually got closer during Covid. We even enjoyed the time, the slowing down and the time together. Although we didn't kind of admit that too publicly. COVID, as I mentioned last week, exacerbated an already pernicious trend toward people spending less time with friends. More loneliness more depression. And that's only, only gotten worse. I think it widened societal divisions. You know, wearing masks and taking vaccines became political, hard to believe, but it did still is. Greater in inequality on display. Covid had a much greater impact on

black and brown and poor communities. Less civility. I think people have forgotten how to behave in public. Seems to be a lot of anger, and you still still see that in evidence. I can't drive for five minutes around Chicago anymore without getting cut off, or somebody jumping in front of me, or somebody honking the horn. And I don't know. Lots of anger, lots of incivility. There were some good things too as, as we, we did at times come together. But actually, I think one of the unfortunate lingering aspects of Covid is the just great divide we have in our society, has gotten wider and deeper in terms of, of healthcare. We just really clearly weren't prepared for a pandemic the Obama administration let the strategic national stockpile deplete. There were all kinds of jurisdictional issues as the government and local municipalities scrambled to respond crossed lines. There was bad guidance that came out of the CDC. There was a reason that more people died of covid per capita in the US than than anywhere else. And in addition to the lack of preparedness, it really laid bare the structural inequalities within US healthcare. On the same side, you know there were some real delivery innovations. I mean, virtual visits went from almost nothing to ubiquitous in seemingly overnight. I was really proud of the regulatory relief that allowed people to cross state lines, practice at the top of their license, and so on. <Laugh>, you know, the marketplace, being the marketplace, we saw the emergence of all kinds of agencies and so on, and nurses salaries went crazy there for a while. It eventually all came back down to earth, but in America, never lose an opportunity to make a buck. Right. the science was amazing. I mean, I'm still the, the use of the mRNA driven vaccines came together from concept to execution in less than a year. And how many more people would've died if we hadn't had the vaccines. I mean, just kind of ushered in the new age of science built on our greater understanding of genetics and all the new, big data analytic capabilities. You both remember Carrie Weems, who unfortunately passed away a couple years ago, but he was acting head of CMS during the bush years is when the anthrax scare happened. And he was the one that put together the plan and created the first strategic national stockpile. Well, anyway, Kerry had three iron laws of pandemics one first stage panic, second stage over respond. Three, forget. And I think we're, we're well into the to the forget stage. But one thing that just kind of amazes me in, in retrospect is we clearly had major structural flaws in the design of our healthcare system, because health insurance companies made record profits and providers needed a government bailout to survive. That was a major fault line. It should have gotten our attention, and it really didn't. We just have kind of rolled through it and gotten back to business as usual.

Burda:

I think the scariest time was waiting for your turn to get the vaccine right? Like waiting for your turn to get in the lifeboat.

Johnson:

Yeah. Julie got mad at us 'cause we were ahead of her in the queue.

Burda:

Well, <laugh>, it's true. <Laugh> age does have its benefits once in a while. Thanks, Dave. Julie, any questions for Dave?

Murchinson:

Dave you brought up a lot of memories. It's so interesting to think back on all this. You know, there's one thing I think we, and maybe even several other people in other, you know, political camps can agree. It's that trust has changed almost everywhere you look, and we're both pretty proud readers of Jan Berger's book on trust. Yeah. What are the potential first steps we could take in rebuilding trust in our institutions? Yeah. In science, all that.

Johnson:

Yeah. trust so hard to earn, so easy to lose. Noah Harrari the, the anthropologist who wrote Sapiens, the kind of updated version of guns, germs, and steel, just one of the great books of the last five years, says the what separated homo sapiens from other higher order mammals was our ability to work with strangers toward common goals. And, you know, just think of how often we do that. And he talks about information systems and how we went from stories to writing to letters, to books, to movies, and, but all of it is sort of hardwired into human beings, is our ability to figure out how to work collectively with people we've never met before. And that's what we're eating away at right now. Julie, what Jan writes about. It may be Pollyannish, but I guess I truly believe the nation can't endure half healthy and half sick. I mean, when you look at diabetes and prediabetes rates, we really are about half, half the population is, is basically sick, and the other other half is healthy. And there's a real opportunity for us to have a road to Damascus moment as a country and really start to emphasize health at local, state, and national levels and all get healthy together again. And it's actually scary to imagine if we continue on the current trend lines. I would put more juice in the effort to try to promote Pro-Health activities and in the process of getting healthier together across the board start to repair reweave some of the societal fabric, some of the trust that we've, we've lost. So that's where I'd start.

Burda:

Yeah. The road is there. Let's hope we take it. Thanks Dave. Julie, it's your turn. How did Covid change you? How did COVID change society and how did Covid change the healthcare system.

Murchinson:

I certainly wouldn't have moved to Seattle, that was a big one and a move that turned me into a remote worker. I'm still pretty obsessed with masks on the ground, honestly. I think about restarting my mask meme all the time. And on that front, I'm pretty aware of illness now. Like I used to take it as more of a normalcy, and now I'm really sensitive to it, especially on airplanes. I just don't even wanna be around it. And I, I struggle now with the number of calls every day. I could probably sit in meetings in person every day and not feel the way I feel at the end of the day that zoom fatigue is real and it's exhausting. So those are big impacts on my life. I think for society. You know, some of what Dave said, in addition to, you know, the increase in Peloton sales, remember that <laugh> and of course all the resales, that was great. And then the pet adoption, we had massive wait list, remember that like everyone got a dog. And then, you know, there was no vet capacity. I mean, it was crazy there for a while, but really, the fact that remote and hybrid work have stuck around it's, it's incredible to me that we are where we are five years later on that issue. And do you remember back when people were talking about the great resignation?

Johnson:

Yeah, yeah.

Murchinson:

I haven't thought about that, please, in so long. But workers I think really do continue to prioritize flexibility and work life balance and working, you know, with people they wanna work with. So I think that's actually a really big kind of cultural shift in work. And schools honestly are a tough one. I mean, you know, we normalized online learning and students certainly have more digital tools today as a result, but we messed up years of learning and we have over half of Republicans that say schools should have been, you know, opened to earlier and only 17% of Democrats. So we're way apart on this issue, even though the, you know, the results are clear. And have you noticed how much more touchless everything there is? Airports, hotels, restaurants, like contactless check-ins. When did you ever use a QR code for a menu before Covid? Like, just didn't happen? So that's pretty cool actually. And service....

Johnson:

Service charges on restaurant bills,

Murchinson:

<Laugh>. Oh yeah, that for sure. Amazon and all e-commerce have pretty much become my default and most people I know. And now we have the curbside pickup, you know, parking spots. And we've really actually institutionalized that whole concept, which I don't think was quite happening as much pre pandemic. And I saw this report on cash use. Have you realized like how little cash people will use now? Like digital payment is, is where it's at. And I don't go to the at ML anymore. I don't even really think about it, which is, I mean, I know some people use cash, but me for different reasons. <Laugh> Dave, like you said, I think social interactions and relationships have definitely changed. Have reevaluate friendships or, you know, just really prioritizing, I guess maybe quality over quantity. And this is one I love. I think I was thinking a lot about going to different cities now and seeing the outdoor restaurants and how our public spaces have really evolved. Like we have so much more outdoor dining and restaurants and cities have really embraced this. So I think that's actually a pretty cool feature post covid. And then Berta, I'll try to hustle here, but there's a lot to say. <Laugh>

Burda:

No, no. Take your time.

Murchinson:

What you got on the healthcare system. Dave, I totally agree with you. We got good at vaccines. There's no doubt. Mrna is amazing, but that VAX mandate really screwed us up. I think it eroded trust. Yeah. and you know, public health has become so partisan. It's really insane. And again, 62% of Republicans said there should have been fewer restrictions and only 15% of Democrats, like we're just on such different pages on this one issue. And I don't care what any haters say, but telehealth became mainstream and has fallen off the, you know, the ledge. But I see every single day health systems and position groups, groups adopting telehealth into certain parts of their business model. We are incorporating it now as part of the fabric. It's taken us a lot of time and it'll take us more time. But, you know, COVID definitely gave telehealth a societal boost. The

workforce shortages Dave talked about. I'm finally seeing health systems embrace technologies that allow us to do more with fewer people. Five years later, we see the writing on the wall and we're getting really creative about it. So it's not happening everywhere, but it is happening. As Dave said this, you know, increased focus on mental health. It's been massive burnout, anxiety, depression, it, but what I see is it's, it's all become pretty mainstream. Like we've done a complete 180 from, you know, clo keeping that behind closed doors to talking about it in social circles. Like it's quite something. And you know, in some places this mass culture has persisted. I read some article that 4% of people regularly wear a masks. I think most of them must live on the West Coast <laugh>, but they're still around. And I do still see them on the ground and last dot comment on something that I think is a post covid issue that has also, you know, continued during all the climate change disaster that we've had. But we have become so hyperfocused on supply chain. And that really started during covid. Do you remember all the drip bags and mass shortages? The companies have to focus on that in a very different way. So I think actually a lot of you know, some good and a lot of disturbing.

Burda:

To one of your points, I haven't had a cold or sore throat, kind of the routine cold and sore throat business for five years, right? Mm-Hmm <affirmative>. And I think that's, you know, you're very conscious of hand washing and wearing masks in the right places. So that, that's, it's interesting. Thanks, Julie. Dave, any questions for Julie?

Johnson:

I know how deeply you care about providing better mental health services for children and young adults. Actually everyone before Covid America was already on a path toward greater social isolation and loneliness for these cohorts, covid added fuel to this raging fire. How do we reverse course and make sure lonely people have more friends? Is it as simple and maybe complicated as figuring out how to make people spend more social time with one another?

Murchinson:

God, you know, it's, it's structural in the way you talk about it, Dave, but it's also cultural. Like, yeah, I don't know that it's about getting people to spend more time together, but it's about creating environments where people can naturally spend time together.

Johnson:

Mm-Hmm <affirmative>.

Murchinson:

And it becomes part of our lifestyle and not some, you know, some technology focused norm that we live in today. <Laugh>. Like, imagine if we just encouraged more of our quote unquote third places like community centers, parks, libraries, cafes. Not just as the places people should go, but more social programming there. Like, there are a lot of places that used to celebrate holidays and have a lot of different activities that have, have not really recovered in doing that. And that's like a very natural way to do that. I also think that social media, you know, you're starting to see some social media really push people to meetups. Like have you seen the running clubs and all sorts of cities that do this and interest based gatherings or, you know singles groups

in certain cities, like using technology to help people find one another in person. We could do a lot more with that. And I wish we were back at work. Like, I think it would make such a difference, honestly. And I don't know what to do about that, because those stupid zoom happy hours were just dumb <laugh>. But, you know, for those who are back at a workplace, like what, maybe we need to re-shift the day, like build in some mandatory breaks. Like we need to find ways to get people back around the water cooler, 'cause we're so used to our own individual work now, and people show up at workplaces now, and they sit on Zoom calls. Like, what is that about? So we just need to create, again, more natural ways that people are allowed to and encouraged to go hang out.

Burda:

Inertia does set in. That is certainly true. Thanks Julie. For me the pandemic surfaced differences between me and the people I thought I knew. Well, you know, over things like science and the role of government, especially my fishing buddies, holy smokes, <laugh> it changed a lot of relationships society-wise. I didn't think we suffered from such a severe shortage of critical thinking in this country. And from a health system perspective, it's definitely made me a more active rather than passive healthcare consumer. You know, I'm all over appointments, test results, prescriptions, asking questions. So, you know, I'm not saying I'm smart, but most of the people running the healthcare system aren't any smarter than me. We're equals and I'm paying the bill so good for us. Right?

Johnson:

You know, Dave, I still remember that contraption. He was set up for Halloween to distribute candy from the second floor. Your engineering skills really impressed me and obviously took a step up there.

Burda:

Yeah, no. People still ask me, are you gonna do that again this year? So maybe I'll bring that back. So <laugh>, yeah, it was a hit in our neighborhood. Thanks for remembering that, Dave. That's great. Okay, let's talk about other things that happened in healthcare this week. It wasn't all bad, was it, Julie? Tell me something that happened in healthcare that we should know about.

Murchinson:

Well, I'm sure you guys saw this, but we had a big mashup in the home care space with dispatch health acquiring medically home. And this is big. And this is also, I think, a bit of a post covid story where hospitals started that hospitals at home concept that, you know, has been really tough to pencil out if you're not thinking about segmenting your business and, you know, planning where it makes sense. So a lot of experiments, you know, here in this transaction.

Burda:

Yeah. Yeah. Home is where the care is. That's great. Dave, did we miss anything important this week?

Johnson:

Well I, this caught my attention. Some employees current and former of JP Morgan Chase launched a class action lawsuit under Erisa for the company's breach of fiduciary responsibility in managing their health plan benefits. Even named board members in the lawsuit. And it was the one of these PBM generated issues where the employees under the health plan felt they were paying too much for the cost of generic drugs and want the company to make good on it. This issue's not gonna [00:47:30] go away and could have a profound effect on the way health plans self-insured employers manage health plans going forward.

Burda:

David, I think you predicted that class action suit business last year. So it's coming to fruition. Good job.

Johnson:

Yeah.

Burda:

All right. Thanks Dave. And thanks, Julie. That is all the time we have for today. If you'd like to learn more about the topics we discussed on today's show, please visit our website@4sighthealth.com. You also can subscribe to the on Spotify, Apple Podcast, YouTube, or wherever you listen to your favorite podcasts. Don't miss another segment of the best 20 minutes in healthcare. Thanks for listening. I'm Dave Burda for 4sight Health.