SELECTION CRITERIA

• Submitted concepts should seek to **improve patient satisfaction and quality of life** for people living with diabetes and/or heart disease in the US. Our goal is to empower and motivate patients with new solutions to improve overall population health.

• Submitted concepts can be products or services that **support the existing care plan model**, OR may **reimagine the care plan** itself.

• Submitted concepts should seek to **address key pain points** in the care plan process. Examples of pain points include: the creation of a patient-centric care plan by the healthcare provider, the process for care plan review and evolution, and the signals of achievement of goals articulated in the care plan.

• Submitted concepts should **recognize the diversity of the chronic disease patient population**. Issues such as the phase of the disease, comorbidities, life stage, support systems, financial and professional circumstances, etc., all impact care plan success.

• Submitted concepts should **reflect an understanding of the patient ecosystem**, including a wide range of stakeholders. Collaboration and support by healthcare providers, family members, friends, caregivers, and social service resources among others, are vital for patient success.

• Submitted concepts should **be inspired by, employ, or contribute to open data sets**.

• Submitted concepts should make an **innovative contribution to the healthcare marketplace**. Products and services should be differentiated from those that are currently available.

• Submitted concepts **must be able to be developed into proof of concept or prototype during the course of the challenge**. At point of submission, solutions can be at an early-stage, without proof of concept or prototype.

• Submitted concepts submitted by teams, rather than individuals alone, are strongly encouraged. We believe **diversity in team makeup** across skills and experience-levels increases the likelihood of solution success over time.