

# Inspiring Women

## Episode 72: Dr. Jennifer Schneider

Laurie McGraw:

Welcome to Inspiring Women with Laurie McGraw. I am your host, Laurie McGraw. I have spent the past 30 years in leadership and over the years I've come to learn one thing. Women need women. And not just any women, but inspiring women. Tune in every week to hear from women at the pinnacle of their careers and from others who are just starting out. Episodes can be found at [inspiringwomen.show](http://inspiringwomen.show), or subscribe on your favorite podcast app. Thanks for listening, and I hope you will be inspired.

Today on Inspiring Women, we are speaking with the CEO and co-founder of Homeward, and we are speaking with Dr. Jennifer Schneider. I am really excited about this. Prior to Homeward, which we're going to learn a lot about, she was the chief medical officer and president at Livongo, where she oversaw the strategic technical and clinical direction of the company. Livongo, as many folks know, was the largest digital health company IPO in the history of digital health. Prior to that, she was with Castlight. She's done many different things. And in between Livongo and Homeward, she took a break. So we're going to talk to Jenny today to learn what she's been doing and hear more about her new company, Homeward.

Jenny, thank you so much for being on Inspiring Women.

Dr. Jennifer Schneider:

Thank you, Laurie. I'm really excited to be in conversation here and particularly with you, so thank you.

Laurie McGraw:

I know. It's been a long time since we've seen each other.

Dr. Jennifer Schneider:

It has been.

Laurie McGraw:

Yeah. This is going to be really great.

So Jenny, I always start Inspiring Women talking about what you're doing right now. And I want to talk more about Homeward, but what are you doing right now?

Dr. Jennifer Schneider:

Well, right this very instant I'm sitting in my home office, having done some laundry this morning and launched the kids to school.

So, we'll get more into this, but when we sold Livongo to Teladoc I took a little break and spent some time with General Catalyst as an executive in residence, and had some time to think through what I wanted to do next. And I'm eager to share more of the insights and learnings from

the break, but part of that led to a launch of a new business, focusing on re-architecting care delivery in rural markets. And so we're announcing Homeward shortly, and I cannot wait to be a part of that team and be on that journey.

Laurie McGraw:

Yeah, well, you have a long history of being with incredible teams and launching very successful companies. And so Jenny, briefly, if we can go a little bit into your background, your career. So you started as a physician and then you did medical informatics. You worked on research, and then these amazing companies. Can you give us a little bit of that story?

Dr. Jennifer Schneider:

Absolutely. And I like to start by saying I'm a middle child with an older and younger brother, and I got bored easily, which explains a lot of my career path or trajectory.

So I went to medical school. I went to medical school largely because when I was 12 I was diagnosed with type one diabetes, which is a pretty intense management condition. And so I learned a lot about health and care and was drawn to ... I was in the academic route for a while. I stayed as a chief resident at Stanford. I went and got a master's in health services research.

And then I joined a company that was in digital healthcare, not because I knew anything about technology or digital healthcare, but because the company, and this is Castlight Health, was really trying to fix a big problem at that time, which was, how do we create a transparency platform to allow people to understand the quality of the care they're choosing and the cost associated with that?

From there, I joined a company called Livongo, which was really looking at, how do we leverage data in the ecosystem to drive people's behaviors and decisions? And so when you start to look across every other industry, our experience has been enhanced. So when you shop on Amazon, they make recommendations. When you watch Netflix, they see what movies or shows you watch repeatedly and they'll make recommendations. And yet healthcare was still, drive to the doctor's office, be on time, wait an extra 45 minutes, read an outdated magazine and have a visit with your doctor for seven minutes and see them again in six months. And so we started to ask ourselves a question, what could we do differently with data to drive behavior and drive changes?

And so then went to Livongo and had a great experience there. Was responsible for overseeing all the product engineering, data science, clinical operations, and marketing. And then we went through the pandemic and that accelerated a lot of the digital health and technology enabled services. We joined forces with Teladoc, and then I left the business along with Lee Shapiro, Zane Burke, and Glen Holman at that same time. And then took a little bit of a transition, a little bit of a break, and some time to focus.

Laurie McGraw:

So Jenny, in all of that ... And I think a lot of people know your career in terms of the success and the highlights, but you self describe yourself as many things. You talk about yourself as an author, as a mom, as an athlete, as a healthcare executive trying to improve the world. And I think from the very successful companies, the healthcare executive trying to improve the world really stands out. But how do you balance those other incredibly important things to you to keep

some ... I don't know if there is balancing your life, but it seems like that's an important aspect. Being a mom, being an athlete. How do those fit in in terms of what you do?

Dr. Jennifer Schneider:

I always like to say that anyone who's doing more than one thing, it just takes a lot of chicken wire and duct tape to make it all work. And so the behind the scenes, the paddling under the water. You may look graceful, but there's a whole lot going on beneath that. And I think that's true for sure for moms who work, and add anything else into the mixture and you kind of amplify that.

So for me, it's simple and not simple. Which is to say, my kids are the most important thing to me, without a doubt, and so I make a lot of sacrifices in order to make that work. Someone jokingly said to me, they said, "I've never known somebody who likes to take as many red eyes as you do." To which I replied, "There's not a single person who likes a red eye flight. I just love to put my kids to sleep." And so then I get on a flight to take off. And so it's a juggling act. And I'm fairly convinced that you can have it all, but you can not have it all at the same time, and so it's a constant prioritization and trade off.

And I think I've had the great fortune of being a part of a team and building teams that are so strong that we're able to swap in and out and really have the frank conversations around priorities and what's important to function as a whole person, and be able to make those trade offs at home and at work so that the whole picture works, not only for me, but for my team and for the partners of parts of the business. And so I think life is a team sport, and really don't like the phrase work life balance, because I think you have one life and work is a part of it, and children are a part of it, and so you get to just live the life you want to live, but recognize that there are trade offs and prioritization to make everything work.

Laurie McGraw:

And I've seen you live it. There was a time that you and I were on a call with a presidential candidate one time. This was a pre-pandemic time. And I remember just being sort of stunned. We had this amazing audience and you were on the call and then you were in the car with your children and you were completely nonplussed about it. That was just normal part of life for you. So you absolutely live that way, and it's not just because we're in a new virtual environment all the time. So that's just great.

Maybe let's go back to Castlight and Livongo a little bit. Obviously two groundbreaking companies. Amazing fame. Castlight, I think in their 2014 IPO, that was one of the first unicorns at a \$2 billion valuation. Then of course the Livongo Teladoc \$18.5 billion transaction. That was news for quite some time. So these were absolutely groundbreaking companies. And you talk a lot about the team in terms of what it took to make those companies successful. What were some of the secrets that you've learned from there?

Dr. Jennifer Schneider:

I love the question. I want to pause just for a second because the episode where I had Angus in the car interviewing the presidential candidate will always go down in our house's history because I recall that he actually noticed Angus and remarked that he was a very handsome boy. And so that is a claim to fame with his sisters.

So, the team question. What makes a good team? I think people say this, and it's probably the most important thing, which is really creating a space where people can show up as their true self. And that to me means not a hierarchical, not an exclusive group. Really looking around the table and asking yourself the question, whose voice is not here and how do we get a person like that at the table? So when I think about diversity, I think beyond just skin color, economic background. I think around diversity of thought and opinion.

And then I have very strong belief in identifying a decision maker. So try really hard to work in teams to build a listening culture, but with an identified decision maker, and that decision maker carries a lot of responsibility to have to listen and ask questions. And in that type of culture you really end up having a very respectful give and take. The decision maker rotates so it's not always the exact same person. Depends on the topic. But that responsibility of listening in order to make a good decision allows for a culture of respect that empowers more people to listen. And I think it's in that modeling.

And then I think the other is just this idea around assume positive intent. We're all going to do things wrong. We're all going to make mistakes. But if you walk in thinking someone else is going to get you, or they're trying to do X, Y, or Z, the team culture breaks down. And so I have a very strong assume positive intent, and when you make a mistake, ask for forgiveness. Acknowledge it and ask for forgiveness. And that discipline of again, keeping people on the same page and pulling in the same direction, even as we have divergent discourse, is really important.

Laurie McGraw:

And when the ingredients work, it's really exceptional to be in that environment. But how do you correct it when it's not working? I have to imagine that you've had those circumstances where the team dynamic is off and it might not just be a one on one conversation. How do you influence it to maybe turn it in the right direction?

Dr. Jennifer Schneider:

I'm a strong believer in calling out the elephant in the room. Again, we just recently had an offsite, and we're in this process of forming a company, and the question is who gets a founder title? And it's like, at the end of the day, none of that really matters. We are all the founding team. We all need to sit down and do this.

So this idea around having a frank discourse where there's some kind of emotional wrinkle or interpretation, and then allow people to kind of comment like, I really don't like that or I do like that, or that makes sense. And I don't like that, but I'm part of the team so I will kind of pass that to the side.

I think the hard parts are where hard issues are kind of shoved in the corner or swept under the rug and not fully addressed up front. I think respectful discourse, there's a lot of disagreement, but through respectful discourse, you can get to that.

I also think that modeling behavior. You're a parent, I'm a parent, and my kids will say, you said we can't have any soda, how come you can have a Diet Coke? And it's like, oh man, they're so right. They're so right. It's this idea around do what I do, not what I say to do. And so it's humbling. Being a parent is probably one of the most humbling management lessons in life.

But I think that's a lot of just holding yourself accountable to the same thing that you're holding your team accountable, and then people follow. It becomes very clear and very easy.

Laurie McGraw:

Well, that's great. So I want to talk about Homeward, but before we do, after Castlight and after Livongo, you made the choice to leave. You had these great successes and then you walked away. So was that a hard decision to do? How did you make such an important decision at the height of both of these companies?

Dr. Jennifer Schneider:

It's a great question. I think for me, it was in some ways a difficult decision, but in many ways, not. So we were in the pandemic. At that time I had a first, a third, and a fifth grader that I had homeschooled while running the business. And it was clear to me that they needed more and that there was an opportunity to take a little bit of a breather, make sure their mental health, their physical health was fine in this period, and that made sense.

I think women perhaps suffer a little more from this, but there's this idea that if I'm not doing it right now, I'll be forgotten. It's a little bit of the FOMO, fear of missing out. But it's also like, man, I didn't really do the job and if I don't do the next job right away, they'll forget that I actually had the skillset. Just have to take a breath in and say, you know what? I am pretty confident that I'm a capable individual. I'm fairly confident that I will find a job that will benefit from the capabilities that I have. And I know that I can go do it when I'm ready. And take a breath and say, now is not the right time for me. That's okay. It doesn't mean I'm not valuable. It just means I'm making this decision on my terms. And I think when you flip the table around like that, then when you're ready to make the decision to take time off or to enter back in, it's with intent and you can do it with your whole self and wholeheartedly.

And I think it's an important reflection for all of us to be asking ourselves, are we doing what we want to be doing right now? Not as a reflection of, can we do it? And not let those self-doubts enter. Because of course you can. When you decide you want to do it, of course you can. And not stay on a track because you have fear of getting off of it, but rather stay on a track or choose a track because you're super excited to be on or staying on that track.

Laurie McGraw:

I appreciate those comments. I want to go to maybe the flip side of that. Many successful people talk about, a very important decision to make is to say no to something. So during this time, while you've been on somewhat of a break, I have to imagine that you've had many opportunities come your way. How do you go about ... Do you? Are you good at saying no to things? And what is your advice for others in terms of how to go about saying no?

Dr. Jennifer Schneider:

I am variably good and not so good at saying no, if I'm being honest. I think that I look at opportunities I come across and I evaluate them for a couple different reasons. One is, is this actually the best thing for me? Or two, is this an opportunity that's unlikely to ever cross again? And for me, I did have a fair number of job offers in this process. And it was clear to me that I was not ready to go back into an operating role.

I did have a job with General Catalyst. I was an executive in residence. But that's a very different responsibility and pace than being an operator, particularly in early stage companies.

So the question was, is it right for me? And almost by default, even if the perfect job had come along, I wasn't ready.

Now, the inverse is, sometimes you may not be ready, but there's an opportunity that's unlikely to present itself again. And those are ones that I would be more in favor of taking yes, even though I may not wholly be ready.

But without a doubt, I think saying no is ... In my mind, saying no is the same concept of prioritization. When I wake up tomorrow, what are the top three things that matter? What are the big five things I need to do by the end of this week? And I look at not just work. I look at that as like my whole life. So what does that mean for the children? What does that mean for my responsibilities as a parent in their education? What does that mean for the house that I live in? What does that mean for work? And kind of prioritize the top urgent items across all of those. That's to me, how I stay focused. And the list sometimes gets a little long, but I don't try to divide work time versus home time, because then I end up feeling dissatisfied rather than addressing the most urgent across my life.

Laurie McGraw:

Well, it sounds like you've figured out where you want to put a new set of energy and a new set of focus, so let's hear about it. So Homeward, you're just launching, you're just announcing. I feel like I'm getting a scoop here in even talking to you about it, which I'm excited about. So, what is Homeward? Tell us about the company. Tell us what you're launching next.

Dr. Jennifer Schneider:

Thank you for the question and the opportunity to talk about it. Homeward is a company that focuses on re-architecting care delivery in markets for people who do not have high quality care, starting in rural markets.

So if you think about healthcare today, one in five of us, or 20% of Americans live in what's defined as a rural market. These markets are truly in a crisis of access. So in the past 10 years, 130 hospitals have closed. Between 2019 to 2020, 37 hospitals have closed. This has left people living in rural markets with half the number of accessible primary care doctors, and one eighth the number of accessible specialty care doctors. People in rural markets with these hospital closures have to drive on average 30 additional minutes to receive care.

So what happens? Mostly, people don't receive care. They don't receive timely care. They don't receive preventive care. Infrastructure such as public transportation or broadband connectivity does largely not exist in these markets. Because of this, and this statistic is actually shocking to me, people living in rural markets suffer 23% higher mortality. 23% higher mortality in the United States. That is the equivalent of looking at mortality statistics in the United States and comparing that to Tanzania.

So there's a real opportunity and a real need to be able to deliver care in these environments. And that care that we'll deliver takes on a couple different forms. This idea of re-architecting, not reinventing, but re-architecting that delivery system.

So the new ideas are first and foremost to align economic incentives for providers, payers, and patients. Right now the healthcare ecosystem is set up that I, as a doctor, if you come

to me sick, Laurie, then you come back sick, and then you come back sick again, I get paid more every time you come back sick. But if we align incentives where, hey, Jenny, you're responsible for taking care of Laurie's healthcare and the cost associated with that, I'm likely to take different actions to improve your health over a time period. So the first idea is to re-architect the payment system for health into a total capitation.

The second idea is to really leverage the technology that we have. The last five to ten years have really kind of made remote patient monitoring, telehealth, home labs, home delivery of medications, have made those much more prevalent.

But the third is to tie all of that data and all of that technology into an efficient care delivery system where you see real people. Livongo was all technology, no services. All technology. And that's great for a lot of things, but almost always, we need to see a person at a point when we need to see them. If you can get the technology to monitor that and understand when you need to have an in-person visit, you can make that happen.

And by the way, in-person visits don't have to mean getting in your car and driving two hours to the closest hospital or closest clinic. It could be as simple as a nurse practitioner in a van showing up at your house to do a physical exam. Or the van parked in a retailer where you spend your day. Every Sunday you go shopping, it's in the parking lot and you can go in and get your care there.

Laurie McGraw:

And do you see Homeward working with ... Safety net hospitals, rural health hospitals in particular are being hit particularly hard in post pandemic or nearing post pandemic times. Do you see Homeward working with those institutions as part of the model that you're talking about?

Dr. Jennifer Schneider:

Absolutely. And so our model is to partner with existing healthcare resources and act as an extension of those resources, not a competition. One of our corporate goals is actually to increase employment in local, rural markets.

Laurie McGraw:

And Jenny, your entire career you have talked about addressing health inequities. That's always been something that's been important to you. How do you see Homeward helping in that area?

Dr. Jennifer Schneider:

I think that's a huge driver. In fact, our team, as you know Laurie, was together recently and we were working through in Wordsmithy our vision statement, which is really providing an opportunity for everybody to have optimal health. Inequity is not the same as sameness everywhere. Not everybody will get the same or choose the same. But what our Homeward is looking to do is actually provide opportunities in these markets where 20% of Americans live and they do not have equal access to health and to care, and we're looking to accelerate the access components to allow people to have those choices to receive optimal care.

Laurie McGraw:

I love that vision statement. And I am rooting for you, Jenny. This is very exciting to hear about what's coming with Homeward. And congratulations on getting it off the ground. I'm sure it's going to be amazing to see what's going to come forward with that.

As we close out on Inspiring Women today, any last advice you want to give to listeners? And in particular, younger women who are just starting out as they think about their own professional journeys.

Dr. Jennifer Schneider:

Thank you for the opportunity to be here, for sure.

I was asked the question recently, what advice would you give to your younger self? And I think the biggest thing is to eliminate self doubt and bet on yourself. Have the drive and the understanding that if you bet on yourself, you're likely to accomplish that. And so that includes speaking up for what you need and what you want. And don't be shy. All somebody can do is say, no. There's a saying that says, you don't have to sit in the best seat in the house, but you have to ask for it or you'll never get it. So have the confidence to know what you want, bet on yourself, and ask for it.

Laurie McGraw:

I think that's great advice. We'll close out on that. This has been a fantastic Inspiring Women episode. We've been speaking with Dr. Jennifer Schneider. Jenny, thank you so much.

Dr. Jennifer Schneider:

Thank you, Laurie.

Laurie McGraw:

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