



Longevity is the goal. How do health systems get there?

EY research shows patient openness to technology that helps them age well

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Introduction

Citizens want more years of good health, and physicians want to help them achieve that. Yet across the globe, health systems have been stalled in transitioning to care models that prioritize prevention and wellness.

The constraint is often because current systems incentivize acute care over prevention, even though a preventive approach can reduce pressure on healthcare systems and government budgets.

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If you look at the return on investment (ROI), the ROI on the preventive side is astonishingly higher, but it takes much longer to see the fruits.

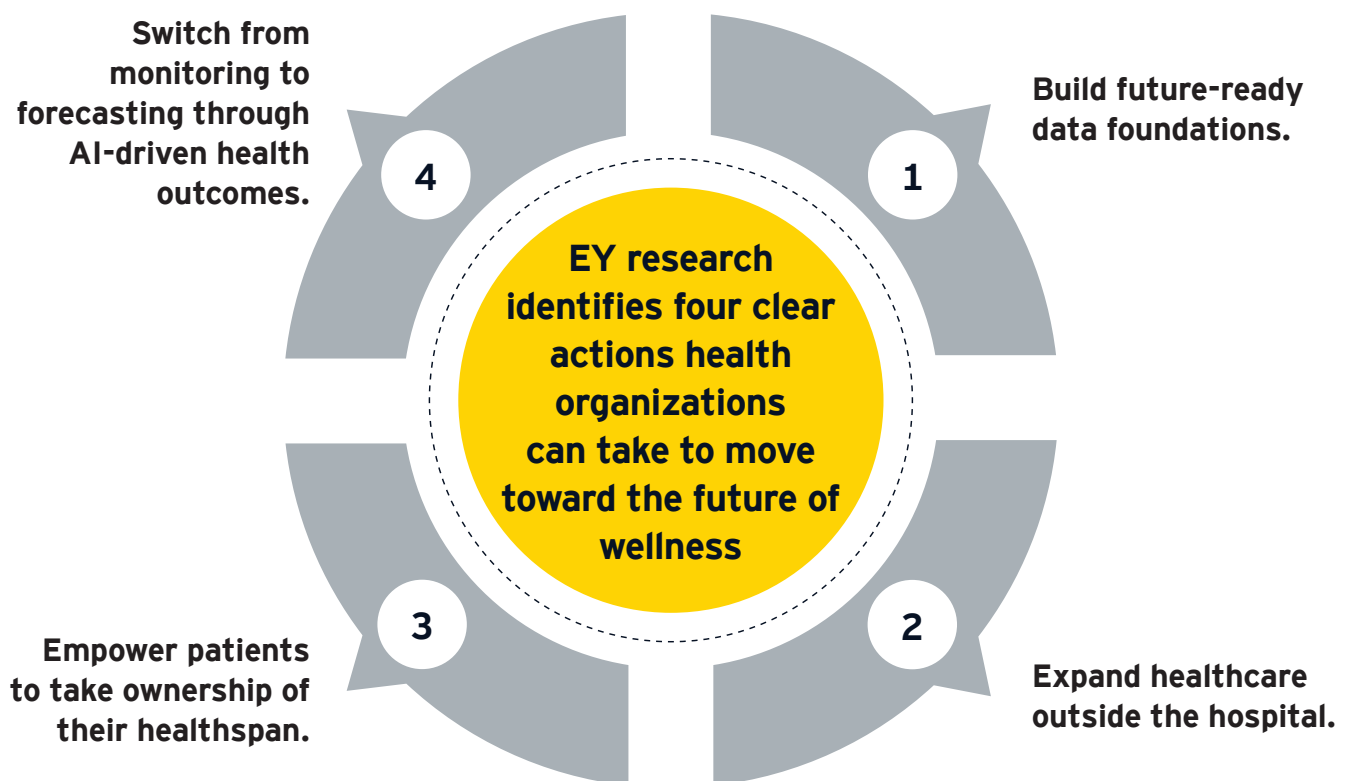
Dr. Rana Al Mandil

Vice President of Strategy and Transformation Risk Management,
Health Sector Transformation Program (HSTP)

In the Middle East, health organizations have an opportunity to focus on wellness and helping citizens achieve longer “healthspans” – the years a person spends living in good health rather than in physical decline. With both payers and providers operating within the government structure in many GCC countries, the region is well positioned to align incentives and design policy that supports better long-term outcomes. This is reinforced by regional initiatives that demonstrate the potential of innovative care models, such as the Emirati Reference Genome Platform (ERGP) that can

power precision medicine and the Hevolution Foundation, which focuses on advancing healthspan science through investment in biotechnologies and research aimed at delaying age-related diseases.

Evidence points to the tremendous benefits of moving toward a proactive healthcare system that helps citizens live more years in good health. Data and analytics can be used to predict when intervention is needed and identify the type of intervention most likely to be effective, considering patients’ daily realities and preferences.¹



Conclusion: transforming to a longevity care model





01

Build future-ready data foundations

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Without robust data infrastructure, none of the goals we talk about are going to be realized.

Dr. Rana Al Mandil

Vice President of Strategy and Transformation Risk Management,
Health Sector Transformation Program (HSTP)

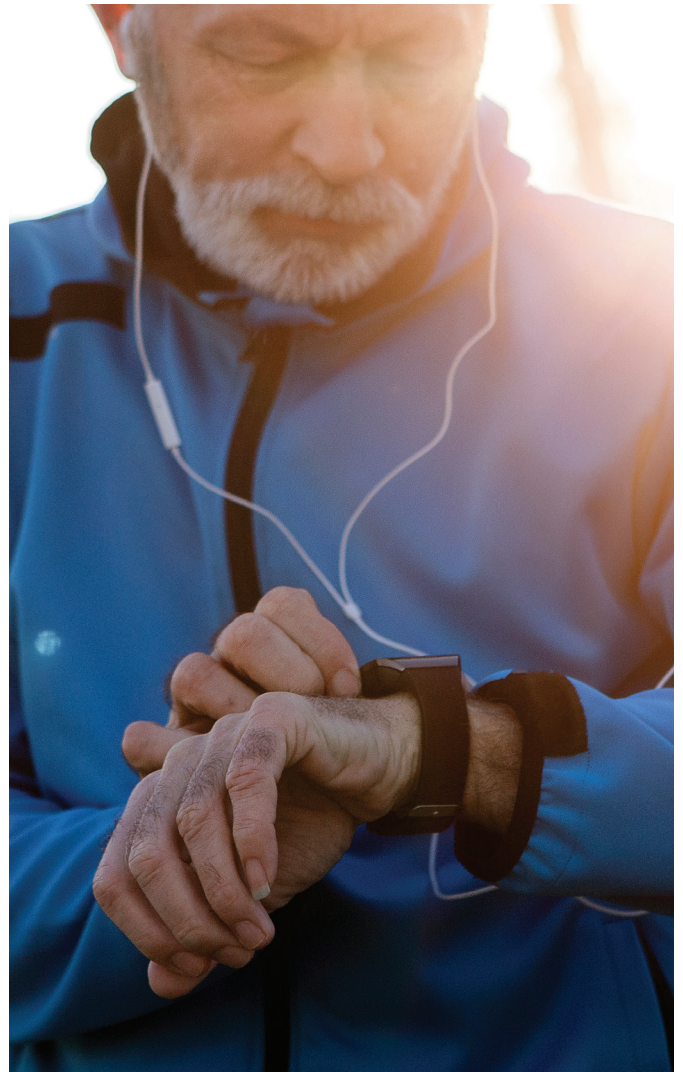
Personalized wellness forecasts, seamless virtual care, real-time patient monitoring and connected care models: None of these is feasible without secure data platforms that integrate information from both inside and outside the health system.

As Saudi Arabia's Vision 2030 intends to move the kingdom toward a unified health file, countries in Europe also are consolidating their data into platforms that power patient-centered applications and greater individual control over health information.

Germany and France have launched initiatives of this kind, and Ireland is in the midst of introducing a shared care record that connects hospitals, physicians and community services.^{2,3,4}

Health organizations should design unified platforms to be agile and future-proof, enabling them to take advantage of emerging technologies. Artificial intelligence (AI) tools that drive efficiency, better outcomes and experience require data that is clean, well-governed and accessible. System infrastructure must support the seamless flow of data within and across systems. From digital health companies to community organizations, the broader health ecosystem requires many diverse partners working together to coordinate the patient wellness journey.

Patients are already moving in this direction. The EY Global Consumer Health Survey 2025 indicates a strong willingness to share health data in support of better care outcomes. Across the globe, 88% of respondents agreed they would be comfortable doing so.





02

Expand healthcare outside the hospital

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Longevity is not only about extending years of life, but ensuring those years are lived in good health, safety, and productivity.

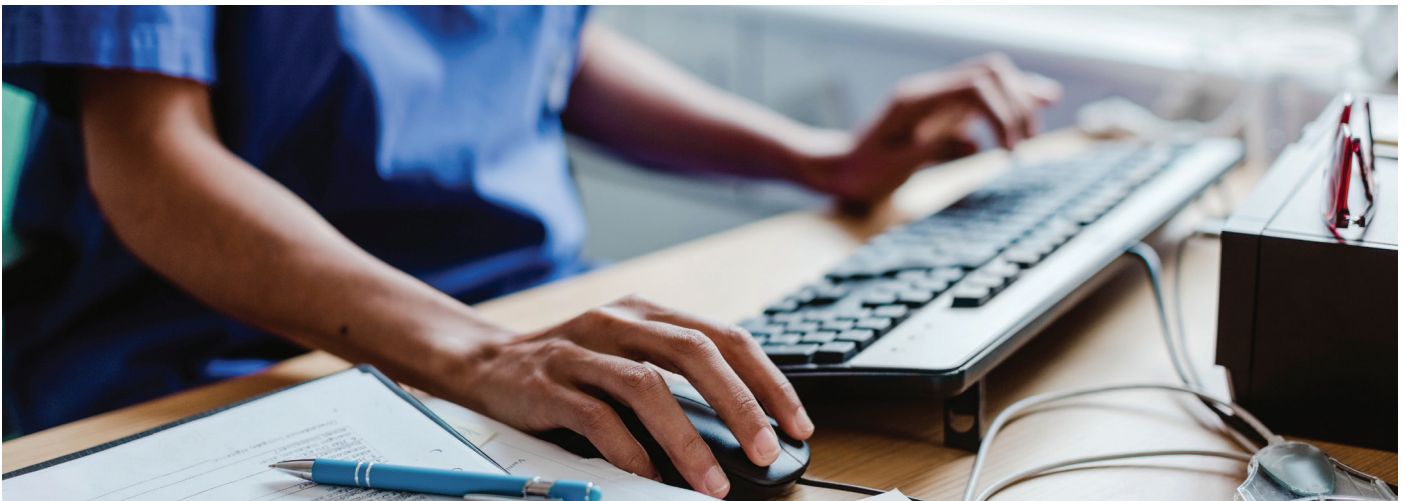
Dr. Mohrah Alalawi
Public Health Physician

Care is increasingly shifting toward the home and the community. Globally, 70% of EY survey respondents said they were moderately to extremely likely to use hospital-at-home services, receiving hospital-level care at home through visits, wearables and virtual care.

In Saudi Arabia, this is supported through national efforts such as the National Council for Occupational Safety and Health, which enhances the protection and wellbeing of workers.

Community-based care is critical to the success of shifting care out of hospitals. These models must account for social determinants of health – such as access to nutrition, housing, education and exercise – to design care plans that work for the patient. Without these timely and often relatively minor interventions, vulnerable patients may experience preventable urgent-care episodes when earlier engagement and navigation could have supported better outcomes. Community interventions delivered through home visits, social group coordination, fitness classes and caregiver support can also make a meaningful impact on patients and families.

The current system also relies heavily on unpaid caregiving. In some cases, the time commitment is substantial: Globally, one in five caregiver respondents reported spending more than 31 hours a week caring for a loved one. These figures point to an opportunity for health organizations to use technology to ease the burden for caretakers who are often balancing work, family responsibilities and caregiving. Intuitive digital tools can help support care coordination, reducing the time caregivers spend making multiple phone calls or searching for guidance. At the same time, because many caregiving responsibilities involve physical tasks – such as helping patients in and out of bed, feeding and dressing – health organizations need to recognize the extent of this unpaid labor and provide appropriate support.



A background image of two men, one Black and one white, both smiling and laughing. The Black man on the left is holding a water bottle. They are outdoors with green foliage in the background.

03

Empower patients to take ownership of their healthspan

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What are the modalities we already know that work? The usual boring stuff — exercise, diet, smoking cessation, sleep. All of this is preventive. We need to figure out how to get individuals to do what we already know will help them, right?

Dr. Mehmood Khan
CEO of Hevolution

Segments of consumers are using digital tools to track steps, count protein intake, monitor heart irregularities, measure water consumption and analyze sleep. However, in many cases, this data is not incorporated into the patient health record, either because physicians are focused on a specific clinical issue or because the data is not relevant to the visit. Patients also need a framework to help interpret and act on this information.

Health systems should determine how to incorporate this data into patient records and develop programs to educate and support patients in their longevity journey.

With growing evidence pointing to the importance of mobility, nutrition, socialization and cognitive engagement in healthy aging, professionals see a clear need for greater focus on these drivers.

To encourage patients to make lifestyle changes, some healthcare organizations are developing individualized forecasts of patients' future health. For example, at Shannex in Canada, a company that supports people as they age, residents or members can receive regular functional health assessments that present insights into current and projected health based on lifestyle factors. These insights can then be used to enroll in specific programs to support individual health goals.⁵

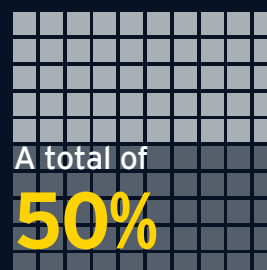
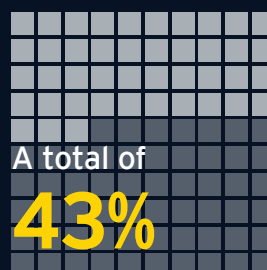
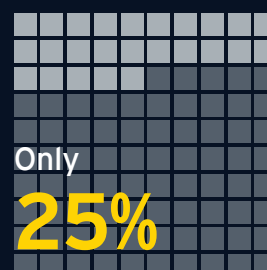
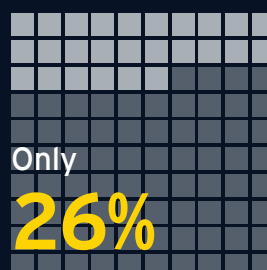
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The challenge for health systems is to bridge the gap in translation of our knowledge into practice. “What are the modalities we already know that work? The usual boring stuff — exercise, diet, smoking cessation, sleep. All of this is preventive. We need to figure out how to get individuals to do what we already know will help them, right?”

Dr. Mehmood Khan
CEO of Hevolution

“Independence is incredibly important to people as they age, to be physically, cognitively and financially in control, said Dr. Khan. But also, “Boomers” especially don’t want to be labeled as elderly. “If you go down the grocery store aisle and you say, well, this aisle is for the elderly. But guess what? Nobody’s going to shop there.”

Findings from a global EY survey highlight opportunities for health organizations to improve the levers that influence healthy aging, based on respondents' self-reported habits:



With roughly 30% of people over the age of 65 living with mild cognitive impairment or Alzheimer’s disease, some health professionals are advocating for cognitive screenings to become a routine part of primary care, comparable to mammograms or colonoscopies.⁵ Too many patients remain undiagnosed and untreated – a gap that could be reduced with regular screenings to normalize cognitive health.

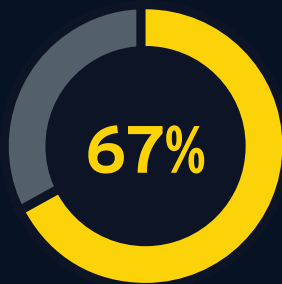


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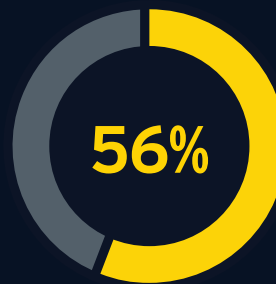
**Switch from
monitoring
to forecasting
through AI-
driven health
outcomes**

With the prospect of predicting individual health challenges, health systems have an opportunity to significantly improve outcomes.

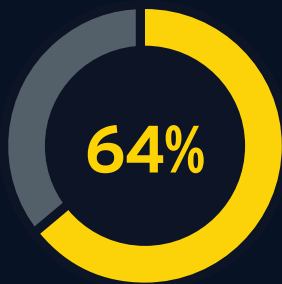
Patients show strong interest in digital tools that support connection with care teams and improve health outcomes, according to EY survey results:



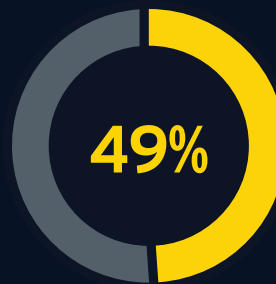
of respondents were moderately to extremely likely to use digital technologies that collect health data such as blood pressure to send to their healthcare team.



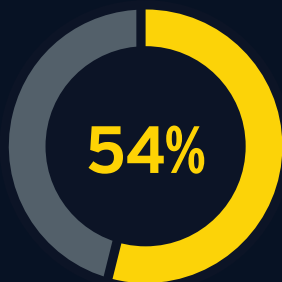
were open to voice-enabled digital assistants that offer reminders to take medicine, drink water, exercise and help make appointments.



were open to digitally enabled healthcare that provides both virtual and in-person options.



reported openness to AI technologies that analyze health data to identify age-related health risks and suitable treatments.



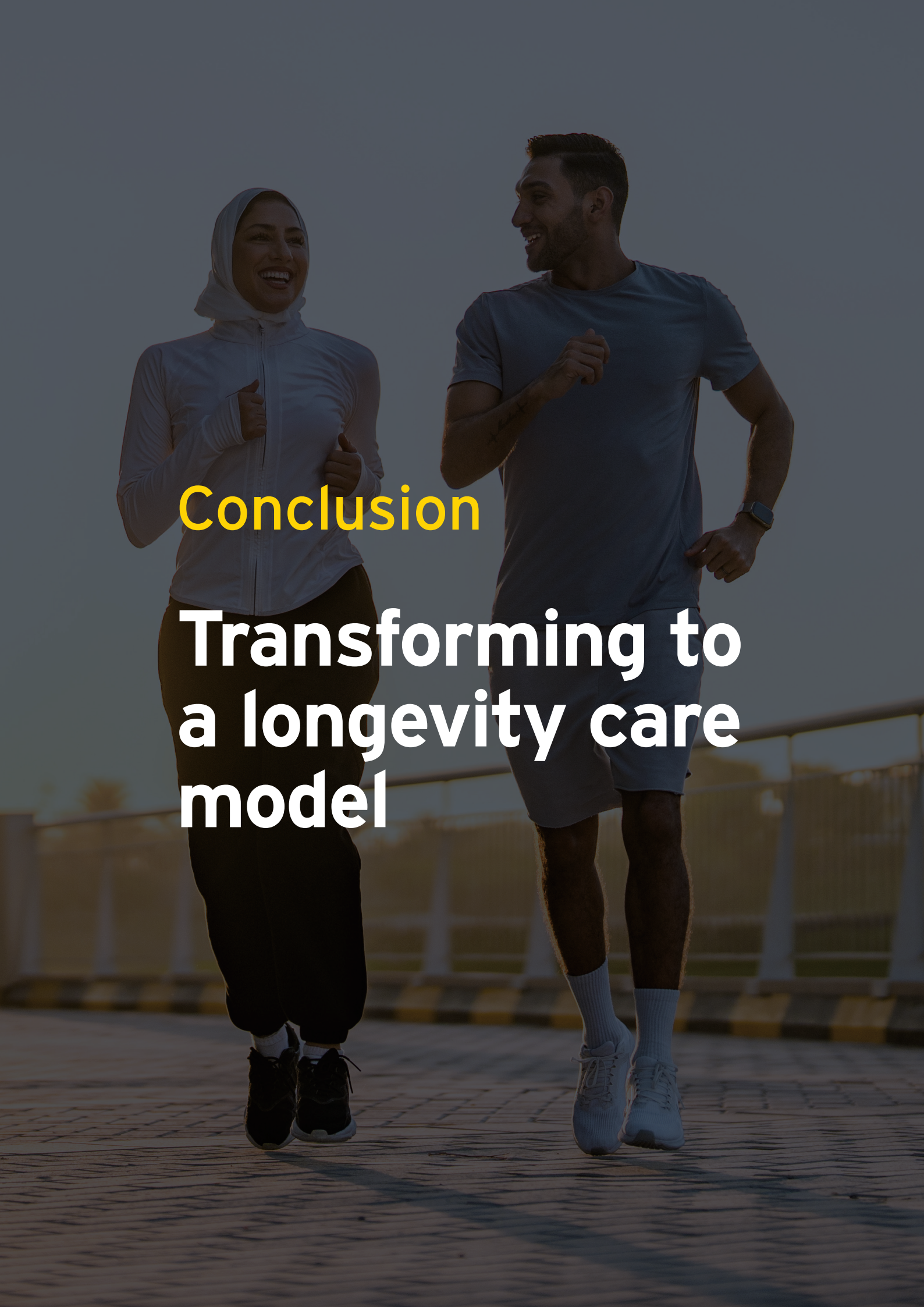
were moderately to extremely likely to use genetic tests that indicate predisposition to certain health conditions as they age.

As real-time monitoring and wearables move beyond simple measures like step counts, they are becoming more sophisticated and creating new opportunities for care teams.

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Right over the horizon, there's a whole series of metabolites that we can measure beyond pulse, oxygen levels and glucose. As those progress, they're increasingly in the hands of the consumer. I think the biggest medical device companies are actually now consumer device companies. And that gives me a lot of excitement. Connecting those to interventions I think is going to be the next big sort of step forward on the core biology.

Dr. Mehmood Khan
CEO of Hevolution

A man and a woman are jogging outdoors on a paved path. The woman, on the left, is wearing a white hijab, a white zip-up athletic jacket, and black leggings. She is smiling and looking towards the man. The man, on the right, is wearing a light blue short-sleeved athletic shirt, dark shorts, and a smartwatch on his left wrist. He is also smiling and looking towards the woman. They are both wearing athletic shoes. The background shows a blurred view of a park or outdoor area with some structures and trees, suggesting a sunset or sunrise setting with soft, warm lighting.

Conclusion

**Transforming to
a longevity care
model**

The longevity care model places the patient at the center and delivers care where they are – not just in hospitals or clinics, but also in communities and homes. The relationship between patients and care teams becomes continuous, enabled by intuitive digital tools, real-time data flows and platforms that connect all partners.

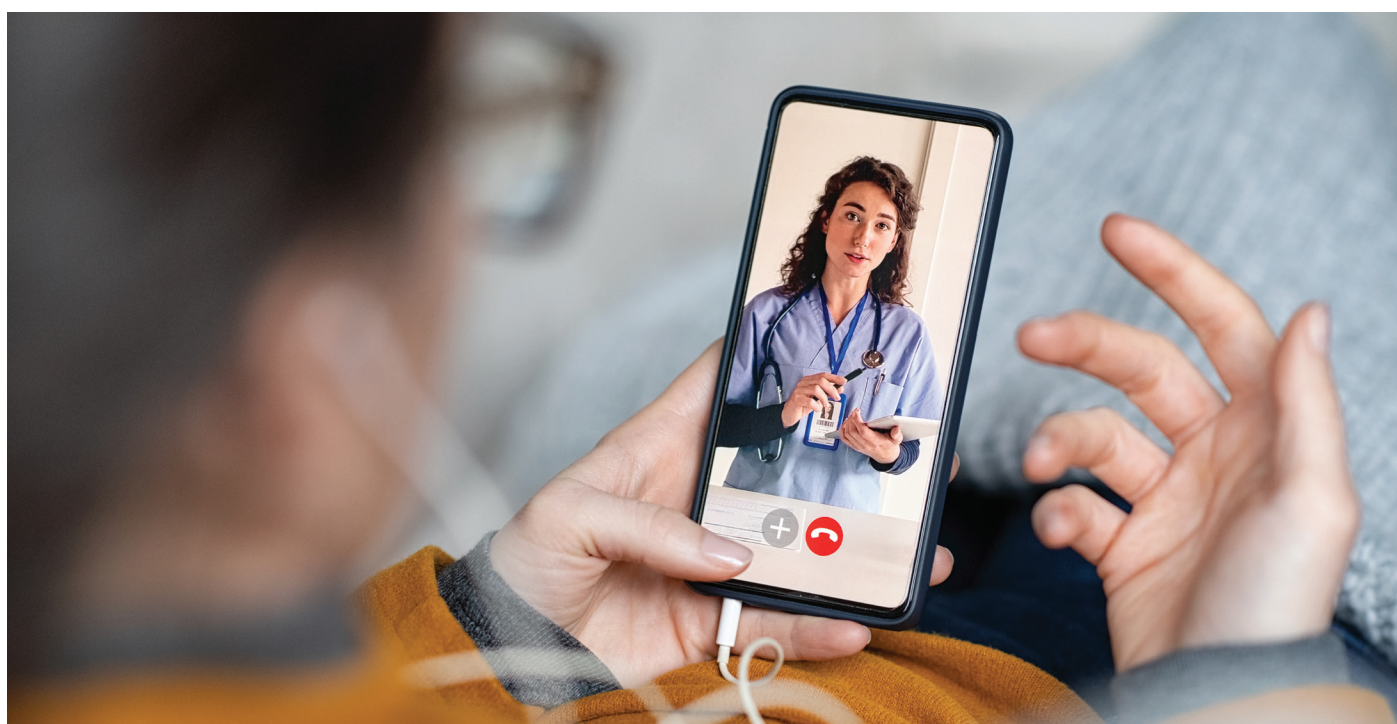
Health organizations will need to improve community-based support and navigation, increasing the use of virtual and digital health to expand access to medical advice when people need it. At the same time, systems will have to build awareness of the factors that drive longevity. For example, virtual physical therapy can help people maintain mobility and increase strength. Personalized nutrition plans can be delivered through applications. Community groups can create opportunities for social connection and provide intellectual challenges as people age. Applications, games and campaigns can also encourage healthier behaviors.

From early detection of retinopathies to early diagnosis of breast cancer, pilots across MENA speak of the promise of advancements in care.

As organizations scale innovation and pivot to a longevity care model, leaders will need to

commit to sustained execution and the change management required to support it. With that commitment, they can build support from all stakeholders, including front line physicians and nurses who are often critical to the success of such efforts. Transformation plans should take a comprehensive view of workflows, operational processes, investments, change management, and both physical and digital impacts.

The transformation will require effort but will be worth it. The longevity care model delivers what patients want: more years of life lived in good health.



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