MOVING TOWARD HEALTHCARE UNBOUND

Chairpersons’ Opening Remarks
Healthcare Unbound 2011

Cindy Campbell
Fazzi Associates, Inc.
ECONOMIC RECESSION

- Epic bust of credit bubble
- Unsustainable debt and deficit burdens/unsustainable healthcare costs
- Entitlement programs in hot debate
- Healthcare Reform - widely variable levels of cultural and real adoption
- Medical bills contribute to > 50% of bankruptcies (many among people who are insured)
- Medical spending exceeds 16% of GDP
- Per capita spend is >50% higher than any other developed country
U.S. Ranks Last Among Seven Countries on Health System Performance Based on Measures of Quality, Efficiency, Access, Equity, and Healthy Lives

[Table showing country rankings and overall performance metrics with scores and ratings for each category]

- Commonwealth Fund
LOW QUALITY DESPITE THE SPEND

“Ranking 37th — Measuring the Performance of the U.S. Health Care System”

NEJM | January 6, 2010 | Topics: Health Care Delivery
Christopher J.L. Murray, M.D., D.Phil. and Julio Frenk, M.D., Ph.D., M.P.H.

• Silos entrenched in reimbursement mechanisms; some systems show promise, most divided and compete vs. collaborate.
• Supply uniquely begets demand; costs rise.
Healthcare Technology Not Optimized

- Health Information **Exchange** limited
- Lacking national societal/health datasets from which we could cull and analyze:
  - ✓ efficacy (health and cost benefit)
  - ✓ safety
  - ✓ satisfaction
- Tech layer on ritual-bound practice vs. integrated into collaborative clinical models.
- Too many miss the opportunity to:
  - ✓ enhance wellness and
  - ✓ manage illness across disease state/continuum providers.
- When supply creates demand the supply can generate a lot of data; but where is the data going?
WHEN THERE’S TOO MUCH ‘NOISE’, WE LOSE THE SIGNAL

Information Overload as the Inverted U-Curve

People and Providers Need Solutions

- Record rates of obesity, chronic disease, avoidable hospitalization
- High infant mortality, low longevity
- Significant, preventable adverse events noted in acute care hospitals
- Widely variable payer investment in the preventive health of their members, as higher turnover rates of members are common: exceptions exist (e.g. Kaiser, VA).
- Financial impact of current healthcare delivery issues are HIGH (person/patient and system)
- The “work of being sick” increases
SKEPTICS ARE GOOD

- Skeptics are not pessimists, not optimists, but realists; show me the evidence!
- The internet revolution has largely supplant the industrial revolution and is in the early stages of a significant secular up-trend.
- Healthcare Unbound technologies and collaborative platforms of care delivery are needed and are proving principle within capitated health systems.
Criteria For Technology Success

• Proof of health and cost utility
• National standards
• Full integration into portable, comprehensive electronic records
• Expanding integration into homes and lives of users
• Insure no data loss and system incompatibilities
• Define and reduce adverse events overall and related to IT
• Reimbursement / legislation must be revamped to reward alternatives to ‘face time’
Technology Success – Human and Corporate

- ROI proven in effective EHR and Telehealth integration
- Tech enhanced wellness maintenance pays in capitated systems and quality of life
- HIE improves quality outcomes when integrated across disciplines
- Satisfaction is enhanced when people understand their own potential control over their health
- Tech enhances productivity within clinical operations when led effectively
- Collaborative innovation enlightens processes, empowers people to manage health and illness throughout the life-cycle
Potential usefulness of integrated technology in health care is substantial as the secular bull market unfolds.
Business opportunities are undeniable within the market of Healthcare Unbound technology.

As we navigate this nascent bull market, we are compelled to remember that we are transacting the capital of human health.

WELCOME TO HEALTHCARE UNBOUND!
REFERENCES

Mirror, Mirror on the Wall: How the Performance of the U.S. Health Care System Compares Internationally
Karen Davis, Ph.D., Cathy Schoen, M.S., and Kristof Stremikis, M.P.P.
Commonwealth fund, June 23, 2010


http://www.commonwealthfund.org
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http://stats.oecd.org/index/aspx

www.fazzi.com

Cindy Campbell  
Fazzi Associates, Inc.  
www.fazzi.com  
ccampbell@fazzi.com  
413.584-5300