

National Dialog for Healthcare Innovation Summit Defining Value in Healthcare

Prepared for Healthcare Leadership Council March 2, 2015

This presentation is solely for the use of HLC and its members (client). No part of it may be circulated, quoted or reproduced for distribution outside of the client organization without prior written approval of ZS Associates.

Impact where it matters.

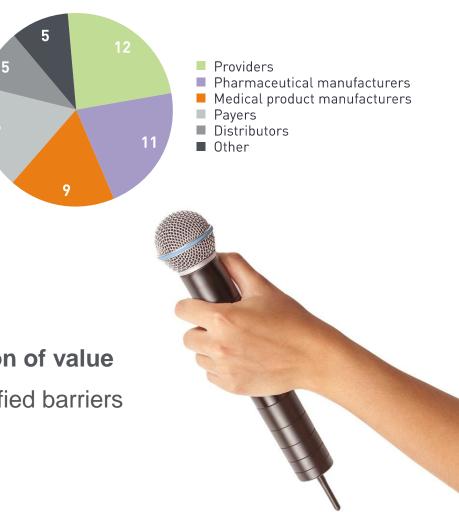
In preparation for today, we gathered input from across HLC's membership

- Interviews with 51 stakeholders from 26 HLC organizations
- Focused discussion:
 - Value in healthcare
 - **Barriers** to value delivery, collaboration and innovation
 - Opportunities to overcome barriers

Report

- Pre-read provided to summit attendees
- This morning: themes related to **definition of value**
- Later today: discussions built upon identified barriers and opportunities

Number of Stakeholders Interviewed



Interviewees generally defined value as a function of quality & cost, naming multiple sources of quality

Definition of Value in Healthcare



Additional Perspectives

- Imperative to both raise quality and lowering (or stabilizing) cost
- Indirect costs (e.g., lost patient or caregiver productivity) noted as difficult to measure, with savings difficult to realize

Various aspects of quality were highlighted, all of which represent value delivered to patients

Humanistic Aspects	Clinical Aspects
 Quality of life improvements, which may vary by individual Service experience: respect for time, friendliness of support staff, accuracy of billing, etc. Promptness and accessibility of care Empathy demonstrated by providers Ability to understand and effectively navigate the "system" Maintenance of wellness or prevention of disease 	 Process-oriented measures: pre-surgery checklists, percentage of diabetics with eye exams conducted, etc. Intermediate outcomes or leading indicators of health outcomes: HbA1c levels, cholesterol levels, blood pressure, BMI, etc. Health outcomes: slowed disease progression, reduction in post-op infections, avoidance of hospitalization, avoidance of CV- related mortality, etc.
Many noted too many metrics in use today are process-oriented	

Many noted too many metrics in use today are process-oriented and not enough outcome-oriented

Two important challenges were highlighted related to assessing value in healthcare



Time horizon over which value is measured



Patient ability to assess value of care delivered

- Value can be considered over patient's entire life
- Some interventions deliver value quickly (e.g., reduce post-op infections); others deliver value over time (e.g., reduce CV risk factors)
- Stakeholders inhibited from taking long-term view (e.g., near-term financial focus, change in payers, transition to Medicare)

- Reforms and payer benefit designs put more focus on patient engagement in decision-making
- Patients have too little easy-to-access and easy-to-understand information to make good decisions
- Some conditions limit patients, emotionally or cognitively, from full engagement in decision-making

Group Discussion – Topic 1 of 3



- How do we define value for purposes of today's discussion?
- Is it different from a patient perspective? Among stakeholder groups? What are the commonalities?

Group Discussion – Topic 2 of 3



What is the timeframe over which we define value?

Group Discussion – Topic 3 of 3



How can we develop consensus parameters defining value that enable forward progress in innovation?