



Achieving the Triple Aim: Lessons from the South

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Agenda

- Leading Organizations
- Common Tools for High Performance
- Lessons Learned



Leading Organizations

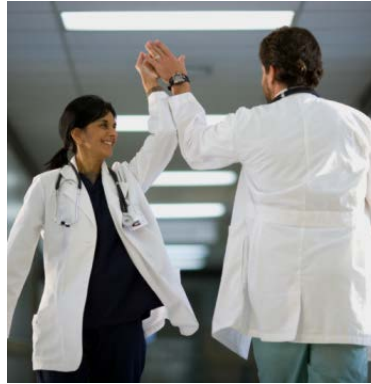
- Geisinger Health System in Pennsylvania
 - Innovative medical home program
 - 18 percent reduction in hospital admissions
 - 36 percent reduction in hospital readmissions
 - Improvement on chronic care management indicators
- Appleton Medical Center and Theda Clark Medical Center in northeastern Wisconsin
 - Redesigned acute care processes using Lean methodologies
 - 15-28 percent reductions in cost per case
 - Lower length-of-stay and readmissions rates
- Kaiser Permanente Health System
 - Comprehensive EMR system introduced in 2004
 - Office visits decreased, telephone and email increased
 - Secure email associated with significant HEDIS improvement for patients with diabetes and/or hypertension
 - Secure email also associated with HbA1c, cholesterol, and blood pressure screening and control



Common Tools for High Performance



**Payment
Approaches**



**Organizational
Supports**



**Information
Technology**

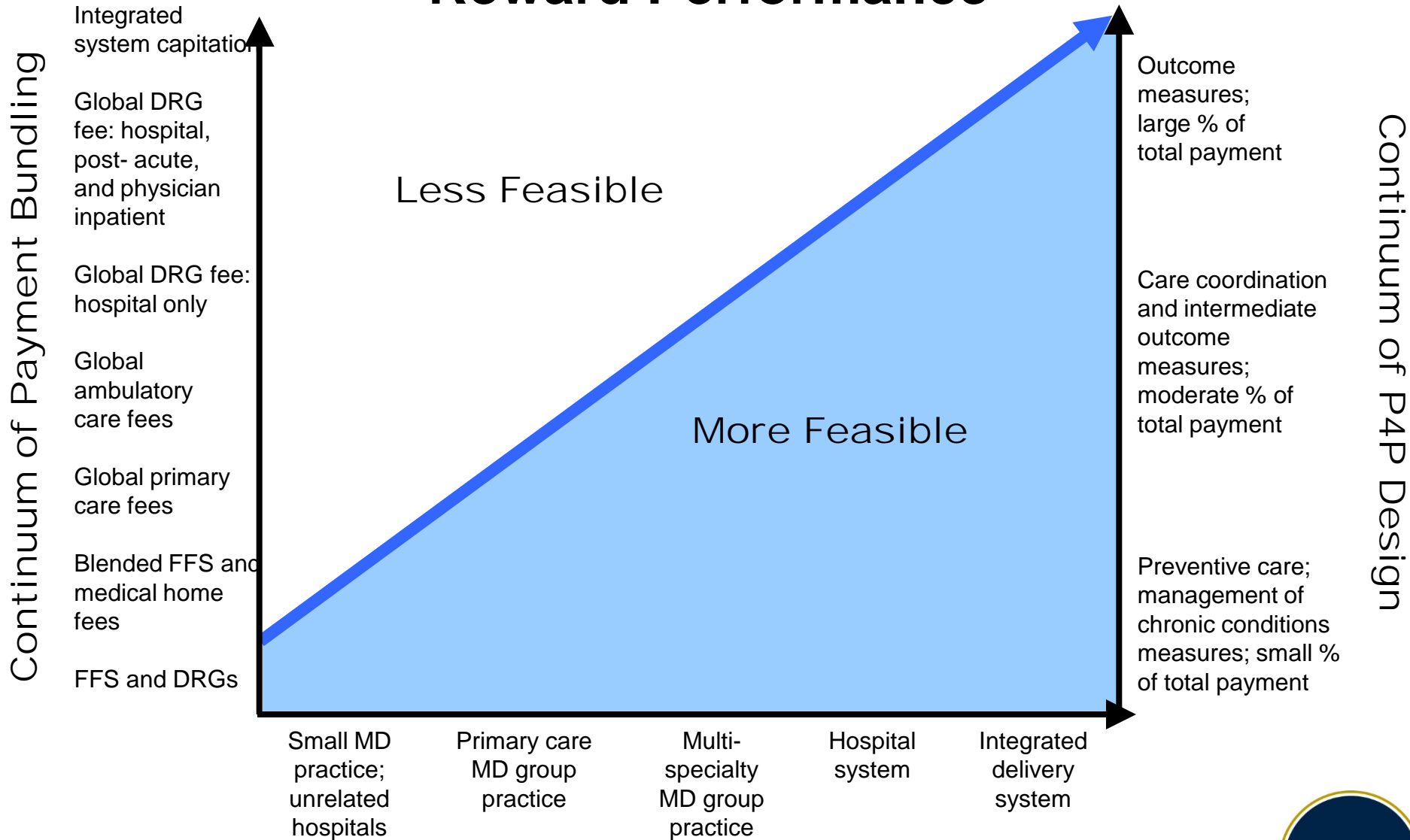


**Shared
Governance**



**Shared
Mission**

Payment Approaches: Economic Incentives That Reward Performance

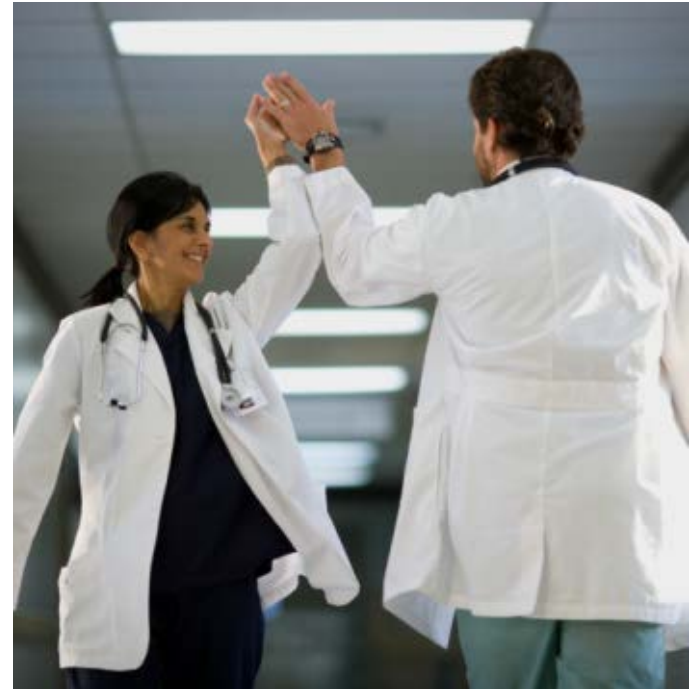


Source: A. Shih, K. Davis, S. Schoenbaum, A. Gauthier, R. Nuzum, and D. McCarthy, *Organizing the U.S. Health Care Delivery System for High Performance* (New York: The Commonwealth Fund, Aug. 2008).



Organizational Supports

- Structure care to enhance performance:
 - Strong primary care and preventive care sector
 - PCMH, high cost care teams
 - Coordination, teamwork, integration of social and health care services
 - Transitions, reduced readmissions
- Culture of improvement and learning within health care organizations
 - Six sigma, Lean methodologies



Health Information Technology

- Availability of best possible information for patients, providers and policy makers at the point of decision-making
 - Meaningful use of electronic health records: CDS/CPOE; HIE, patient engagement.
- Harvesting information for performance improvement, learning, and public health promotion
 - Data underutilized in both US and Canada
 - Only 23 percent of Canadian PCPs routinely received data on clinical outcomes in 2012
 - Only 15 percent routinely received and reviewed data on patient satisfaction
 - Near 90 percent of PCPs reviewing data in leading countries



Shared Governance and Mission

- Trusted, stable and responsive governance
 - Staff involvement in planning and decision-making
 - Evidence-based decision-making.
 - Clear mission and values that are constantly reemphasized.
 - A culture of continuous improvement.



Lessons Learned

- It is possible to create high-performing health systems.
- Such systems must be nurtured over years, decades.
- They do not proliferate unless the environment encourages or at least permits them to.
 - They certainly do not proliferate if the larger system creates obstacles to their formation.
- Creating such systems requires that macrosystems be properly aligned, and that leaders and providers understand the techniques that make microsystems work well, both independently and in combination.

Question and Answer

