Key Attributes to Obtaining Better Outcomes and Reduced Costs in the Healthcare System Through Innovative Approaches

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Abstract

Research Question: What factors result in, or impede, the delivery of high-value (i.e. better outcomes at lower costs) healthcare.

Methods: We performed an analysis of innovative delivery models utilized at 10 strategically selected healthcare organizations throughout the United States (US). The analysis included a literature search, telephone interviews, integration of information we obtained into a pre-established template, a follow-up questionnaire that quantitatively ranked the findings, and a data integration from the questionnaire.

Results: 10 different enablers were found to be common among the organizations. The organizations ranked *provider leadership* and *shared vision* to be the two most important enablers. Three common barriers to success were found among the organizations. *Provider culture* was assessed as the most important barrier to overcome in the follow up questionnaire.

Significance: The U.S. spends more overall and more per capita than any other country on healthcare, yet we are ranked 37th in the world for healthcare performance on average. The information from this study provides a better understanding of how effective organizations are producing high-value healthcare and may act as a roadmap for organizations actively looking to produce better outcomes while lowering their costs.

Introduction

The U.S. spends an unprecedented $2.7 trillion annually on health care, yet we have remarkable variability in access to care, the type of care patients receive, mortality rates, safety outcomes, and patient satisfaction. If costs continue to rise the U.S. will face a devastating financial crisis that may bankrupt the country. The question is whether or not there are examples of healthcare organization/providers that are providing high-value healthcare and if so what are the elements that have led to their success.

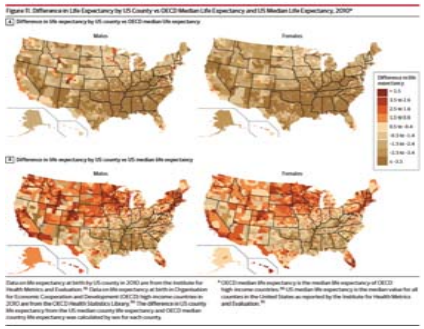

Figure 1: 2013 JAMA article figure depicting life expectancy variation in the United States between males and females as compared to OECD countries and the United States.

Methods

We performed an analysis of 10 different organizations throughout the United States that have yielded high-value healthcare through an innovative process. The 10 organizations researched were:

1. Banner Good Samaritan iCare (Phoenix, AZ)
2. Camden Coalition of Healthcare Providers (Camden, NJ)
3. CareMore Medical Group (Southwest United States)
4. Institute for Clinical Systems Improvement (Minnesota)
5. Integrated Care Collaboration (Central Texas)
6. North Texas Specialty Physicians (North Texas)
7. Physician Group Practice Demonstration (Countrywide)
8. Presbyterian Healthcare Services (Albuquerque, NM)
9. Rocky Mountain HMO (Grand Junction, CO)
10. Virginia Mason Medical Center (Seattle, WA)

These were selected among more than 30 different organizations originally discussed by our team. They were chosen with the intention of compiling a cohort of successful organizations having a wide range of variability in their makeup. The criteria utilized were:

- Longevity to display successful outcomes
- A sustainable (or potentially) business model
- An innovation that lowered costs of care delivery
- Population focus (i.e. urban vs. rural)
- Practice type (i.e. chronic disease vs. acute)
- Type of innovation

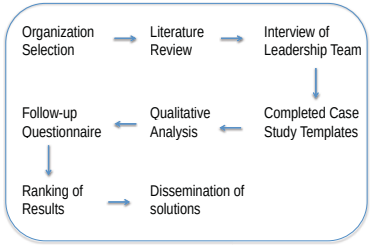

Figure 2: Flowchart showing the process we undertook to compile and analyze our data.

Results: Enablers for Success

We found 10 enablers that were present in at least 3 of the organizations analyzed. They are as follows:

1. Provider Leadership
2. Shared Vision
3. Patient Centeredness
4. Culture of Learning
5. Clear Business Case
6. Front-Line Empowerment
7. Presence of an Active & Willing Payer
8. Co-creation with the Customer
9. Defined Population
10. Information Technology

Results: Enablers for Success (cont'd)

Table 1: Enablers present at each organization.

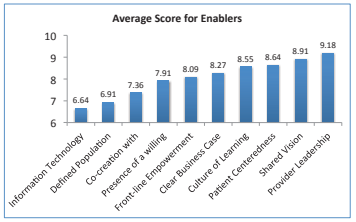

Figure 3: Bar graph depicting the avg. score for each enabler. Provider leadership had the highest avg. score at 9.18.

Results: Barriers to Success

We found 3 barriers that were present in at least 3 of the organizations analyzed. They were:

1. Provider Culture
2. Reimbursement
3. Government Regulations

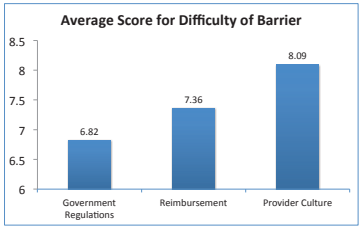

Figure 4: Average score for each barrier. Provider Culture had the highest average score at 9.18.

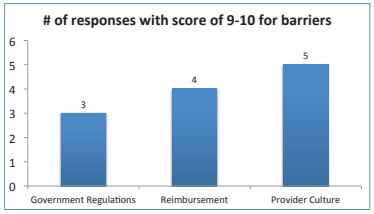

Figure 5: Bar graph showing number of responses to barriers with a score of 9 or 10.

Results: Time Requirements for Success

We sought to determine if there was an average time frame in which organizations should begin to expect positive results from their new innovative strategy. See Fig. 6 below.

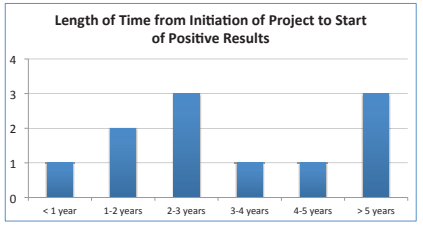

Figure 6: Bar graph showing the number of responses in regards to the length of time from initiation of the project until achieving positive results.

Discussion and Conclusions

Our results demonstrated that provider leadership is the most important enabler for organizations to fulfill their missions. In the healthcare setting, providers remain on the front lines interacting with patients and dealing with the problems of the current system. Their vision, input, and leadership are prudent to implementing solutions that persist continuously.

Perhaps the biggest surprise was that presence of a willing payer was not reported at a higher level of importance. Many organizations reported that payment/reimbursement was either an area of concern that prompted their initial quest or that obtaining payments for their innovation was a difficulty.

Provider culture was the most difficult barrier to overcome amongst our organizations. Most providers in healthcare spent many years in school/ on the job learning a specific method of performing their trade. When asking them to alter this instilled training, one would expect pushback. Many groups overcame this challenge by including several of the providers in the planning and execution of the project.

The responses to length of time before successful results began failed to demonstrate any dominant required time period. This can possibly be explained by the fact that we selected projects across a broad range of topics and size.

Compared to other publications our findings are similar in some of the specific attributes, however our actual ranking of the findings is unique and helps establish that organizational (executive level) actions are the most crucial for success.

The U.S. healthcare industry is notorious for market inefficiencies and system waste, however, our analysis shows that innovation and high value healthcare are not only feasible but achievable. For those organizations achieving substandard outcomes and spending more financial resources to care for patients, that does not have to be the status quo. An understanding of the factors that lead to innovative success and progression may escalate the performance of those organizations not achieving high-value care and reduce the variability the U.S. is currently obtaining.

Acknowledgements

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