IMPROVING HEALTH BEYOND CLINICAL EXCELLENCE:

THE NEXT GENERATION OF VALUE BASED CARE

Karen B. DeSalvo, MD, MPH, MSc
September 27, 2018
OUR PROBLEM TO SOLVE

Life expectancy vs. health expenditure, 1970 to 2015

Health financing is reported as the annual per capita health expenditure and is adjusted for inflation and price level differences between countries (measured in 2010 international dollars).

BETTER HEALTH CARE

• Move to value
• Public-private sector effort
  • Set goals for Medicare
• Significant Progress
  • Bent the cost curve
  • Quality and safety improved
  • Patient experience improved
  • Digital transformation

BROADLY DISTRIBUTED

ACOs by State

ACOs by Hospital Referral Region

Source: Leavitt Partners Center for Accountable Care Intelligence
ONGOING MOVEMENT TO VALUE

- Private sector
- Current Administration
- Congress
- Budgetary pressure
  - Federal outlays
  - State opportunity

33 Million Lives

www.hcttf.org; www.hcp-lan.org
LIMITS TO OUR PROGRESS

COSTS CONCENTRATED IN A FEW

Distribution of health expenditures for the U.S. population, by magnitude of expenditure, 2013

Population Share of Health Spending

1% 5% 10% 50% 97%

22% 49% 65%

*Agency for Healthcare Research and Quality analysis of 2013 Medical Expenditure Panel Survey; MEPS Statistical Brief 480.*
### MEDICALLY & SOCIALLY COMPLEX

<table>
<thead>
<tr>
<th>Category</th>
<th>Age 65+</th>
<th>Female</th>
<th>White race</th>
<th>No high school degree</th>
<th>Income below 200% FPL</th>
<th>Public insurance</th>
<th>Fair or poor health status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total adult population</td>
<td>17%</td>
<td>31%</td>
<td>55%</td>
<td>52%</td>
<td>58%</td>
<td>63%</td>
<td>77%</td>
</tr>
<tr>
<td>Three or more chronic diseases, no functional limitations</td>
<td>57%</td>
<td>72%</td>
<td>72%</td>
<td>72%</td>
<td>72%</td>
<td>72%</td>
<td>72%</td>
</tr>
<tr>
<td>Three or more chronic diseases, with functional limitations (high need)</td>
<td>16%</td>
<td>14%</td>
<td>14%</td>
<td>14%</td>
<td>14%</td>
<td>14%</td>
<td>14%</td>
</tr>
</tbody>
</table>

**Notes:** Noninstitutionalized civilian population age 18 and older. Public insurance includes Medicare, Medicaid, or combination of both programs (dual eligible).


SOCIAL DETERMINANTS

“conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.”
- Healthy People 2020
DEATHS OF DESPAIR

Working class white Americans are now dying in middle age at faster rates than minority groups

Alison Burke · Thursday, March 23, 2017
Our Zip Code Affects Our Health More Than Our Genetic Code...

SOCIAL DETERMINANTS LINKED TO OUTCOMES

<table>
<thead>
<tr>
<th>Economic Stability</th>
<th>Neighborhood and Physical Environment</th>
<th>Education</th>
<th>Food</th>
<th>Community and Social Context</th>
<th>Health Care System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment</td>
<td>Housing</td>
<td>Literacy</td>
<td>Hunger</td>
<td>Social integration</td>
<td>Health coverage</td>
</tr>
<tr>
<td>Income</td>
<td>Transportation</td>
<td>Language</td>
<td>Access to healthy options</td>
<td>Support availability</td>
<td></td>
</tr>
<tr>
<td>Expenses</td>
<td>Safety</td>
<td>Early childhood education</td>
<td>Social systems</td>
<td>Provider availability</td>
<td></td>
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<tr>
<td>Debt</td>
<td>Parks</td>
<td>Vocational training</td>
<td>Community engagement</td>
<td>Provider linguistic and cultural competency</td>
<td></td>
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<tr>
<td>Medical Bills</td>
<td>Playgrounds</td>
<td>Higher education</td>
<td>Discrimination</td>
<td>Quality of care</td>
<td></td>
</tr>
<tr>
<td>Support</td>
<td>Walkability</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Health Outcomes**
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Expectations

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>ReAdmission ↑</th>
<th>Non-Adherence ↑</th>
<th>Cost ↑</th>
<th>Satisfaction ↓</th>
<th>Risk ↑</th>
</tr>
</thead>
</table>

HEALTH BEYOND CLINICAL EXCELLENCE

www.healthypeople2020.gov: Leavitt and DeSalvo, Modern Healthcare, 2017; adapted from James Rubin, TAVHealth
APPROACHES TO ADDRESSING SOCIAL DETERMINANTS

• Focused on significant health challenge

• Focused on a specific population

• Focused on a specific social determinant of health
STEPS TO ACTION

1. Identify Target Population
2. Identify Social Needs
3. Assess Community Resources
4. Develop Workflow to Support Referrals
5. Assess Impact
IDENTIFY TARGET POPULATION
IDENTIFY SOCIAL NEEDS

• SDOH Assessment tools
  • Many now available
  • Most focused on “health-related social needs”

• Sample tools
  • PRAPARE
  • Center for Medicare and Medicaid Services
  • Many homegrown

• Leveraging clinical and claims data
• Scraping retail and other data
• Create social risk categories and scores
• Target action

Algorithms predict need for social determinants of health services

By Greg Slabodkin
Published February 22 2018, 6:42am EST

Algorithms developed by Indiana University-Purdue University Indianapolis and the Regenstrief Institute have been shown to accurately predict the need for social determinants of health (SDOH) service referrals among patients at a safety-net hospital by leveraging clinical and community-level data.

IUPUI and Regenstrief researchers utilized data from 48 socioeconomic and public health indicators to build the "random forest" decision models predicting the need for mental health, dietitian, social work and other SDOH service referrals for patients at Eskenazi Health in Indianapolis.
Search for free or reduced cost services like medical care, food, job training, and more.

By continuing, you agree to the Terms & Privacy.
DIGITAL SUPPORTS

• Automating the process
• Linking to resources
• Closing the loop
• Generating data about met and unmet needs
• Creating opportunity to determine business case
STEPS TO ACTION

1. Identify Target Population
2. Identify Social Needs
3. Assess Community Resources
4. Develop Workflow to Support Referrals
5. Assess Impact
MOVING FURTHER UPSTREAM
CHANGING THE CONTEXT

• Go beyond addressing social determinants of care
• Change upstream context – social determinants of health
• Evolving levels of engagement:
  1. Refer to housing agency
  2. Pay for housing supportive services or Air-conditioner
  3. Build housing
• Anchor institution concept

HOW WILL WE PAY FOR THIS?
FINANCING

• Philanthropy
• Community benefit
• Health care dollars
  • Private plans
  • Medicaid
  • Medicare

3 Tracks

Track 2 Assistance – Provide community service navigation services to assist high-risk beneficiaries with accessing services

Track 3 Alignment – Encourage partner alignment to ensure that community services are available and responsive to the needs of beneficiaries
RETHINKING THE RESOURCES

Health and Social Care Spending
Percent of GDP

<table>
<thead>
<tr>
<th>Country</th>
<th>Health Care</th>
<th>Social Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>FR</td>
<td>21</td>
<td>12</td>
</tr>
<tr>
<td>SWE</td>
<td>21</td>
<td>12</td>
</tr>
<tr>
<td>SWIZ</td>
<td>20</td>
<td>11</td>
</tr>
<tr>
<td>GER</td>
<td>18</td>
<td>11</td>
</tr>
<tr>
<td>NETH</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>US</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>NOR</td>
<td>16</td>
<td>15</td>
</tr>
<tr>
<td>UK</td>
<td>8</td>
<td>9</td>
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<tr>
<td>NZ</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>CAN</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>AUS</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

How Rideshare Companies Can Address Social Determinants of Health

Rideshare companies have become an important vehicle for driving better patient care access and addressing the social determinants of health.
CVS Health goes virtual with telemedicine visits
By Rachel Z. Amdt | August 9, 2018
Following in the footsteps of Walgreens and Rite Aid, CVS Health is getting into the telehealth game.
CVS Health will now offer virtual visits for minor health problems, a move that could help the pharmacy chain reach consumers and stay competitive in a space that might soon include providers reportedly launching primary-care clinics for its employees.

Direct to consumer relationship...
Know their social determinants and health needs before they do.
KEY TAKEAWAYS

1. Begin with **better** health care – move to value
2. Health **beyond** health care
3. Build a healthy **community**
4. Opportunities for **innovation**
CLOSING THOUGHTS

• Improving health and bringing value to the health care system will require more than clinical excellence
• No one sector can do this alone
• Will require public-private collaboration
• Test and learn...scale...spread
• Stakes are high
• Opportunity window that requires bold, strategic, collaborative and accelerated action
  • By you – as health care leaders and as civic leaders
Thank you!
@kbdesalvo