

# FUTURE OF HEALTHCARE – DISRUPTIVE AGENTS OF CHANGE

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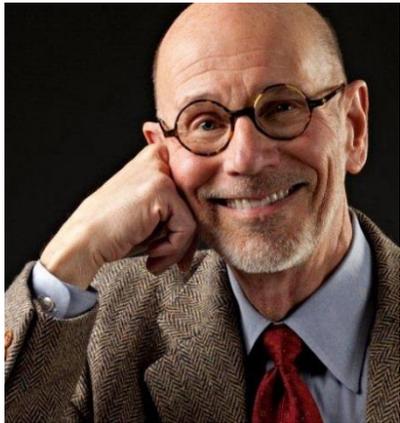
# FUTURE OF HEALTHCARE AGENDA

WELCOME

PRESENTATION

- FUTURE OF HEALTHCARE: DISRUPTIVE AGENTS OF CHANGE

DISCUSSION



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JENNIFER UKURA

# FUTURE OF HEALTHCARE – CAUSE VS RESPONSE

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**CAUSE:**  
EXTERNAL  
DRIVER OF CHANGE

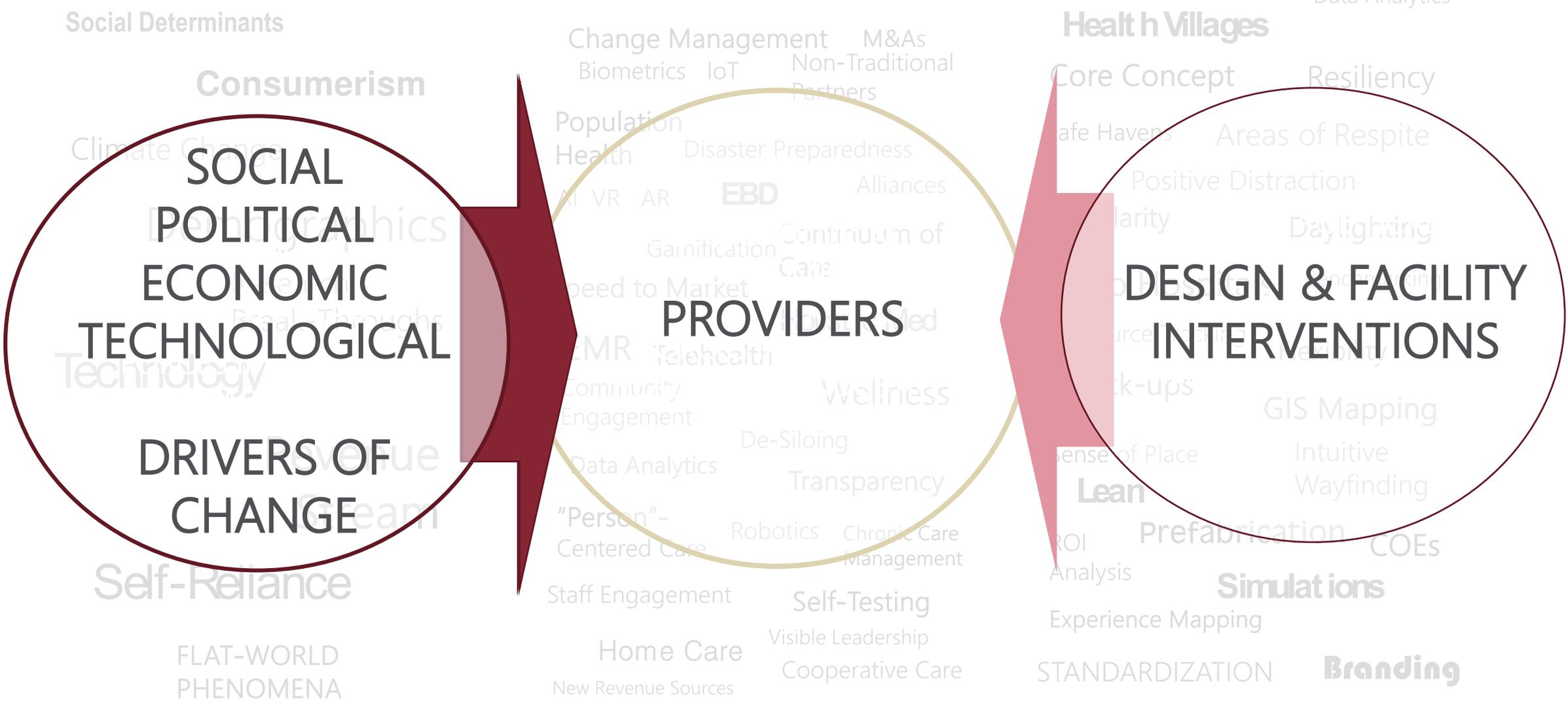


**RESPONSE:**  
PROVIDER INITIATIVE



**FACILITY:**  
ENABLING STRATEGY

- For-Profits
- Non-Profits
- New Players
- Group Practices
- Indies



**CAUSE:**  
EXTERNAL  
DRIVER OF CHANGE

Social Determinants

**Consumerism**

Climate Change

Demographics

Research

Breakthroughs

Technology

Revenue  
Stream

Self-Reliance

FLAT-WORLD  
PHENOMENA

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Change Management M&As  
Biometrics IoT Non-Traditional  
Partners

Population Health Disaster Preparedness  
AI VR AR **EBD** Alliances

Gamification Continuum of  
Care  
Speed to Market

**EMR** Telehealth Holistic Med  
Community Engagement Wellness

Data Analytics De-Siloing  
Transparency

"Person"-  
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Staff Engagement Self-Testing

Home Care Visible Leadership  
New Revenue Sources Cooperative Care

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Data Analytics

**Health Villages**

Core Concept Resiliency

Safe Havens Areas of Respite

Positive Distraction

Modularity Daylighting

**Micro Hospitals** Benchmarking

Resource Tracking Flexibility

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ROI Analysis

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# DRIVERS OF CHANGE

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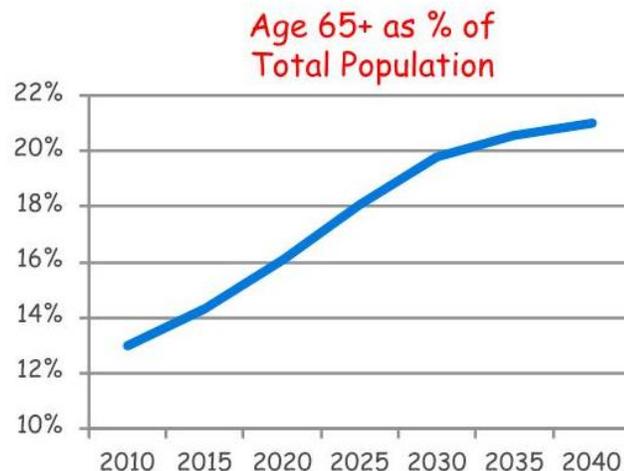
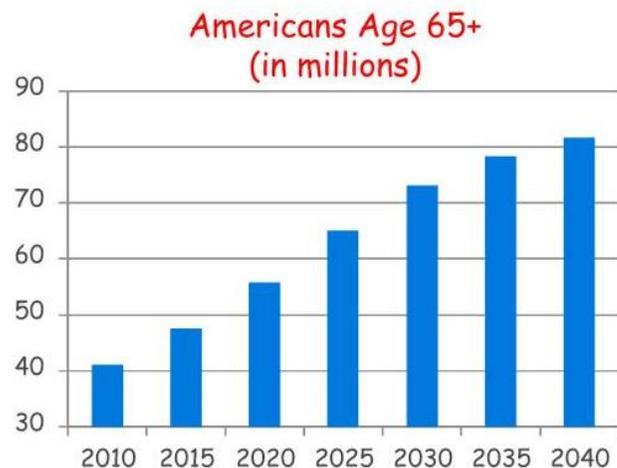
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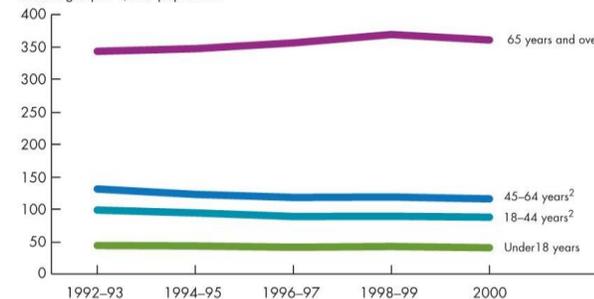
# DEMOGRAPHICS



## Overall Trends in Health Care Utilization

Chart 15A: Hospital discharges, by age: United States, 1992-2000

Discharges per 1,000 population<sup>1</sup>



<sup>1</sup>See "Appendix 1: Sources and Limitations of the Data" for a description of the population estimates used. <sup>2</sup>Time trend is significant (p<0.05).  
SOURCE: Centers for Disease Control and Prevention, National Center for Health Statistics, National Hospital Discharge Survey (NHDS).

Increase of those over 65      x2

Utilization of those 65+      x3.5

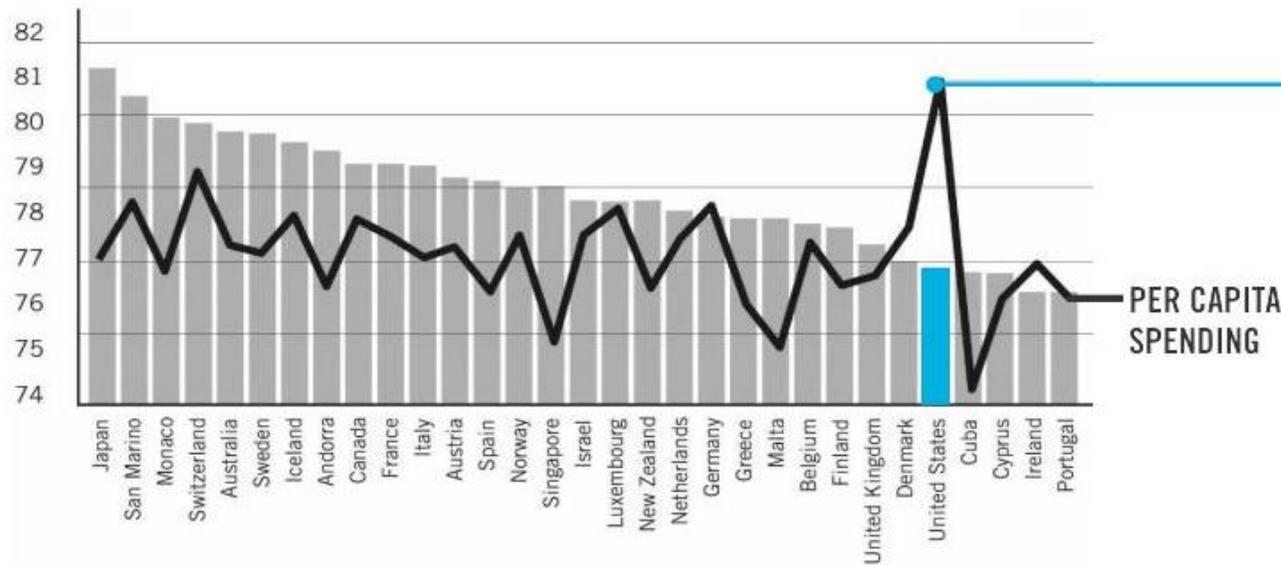
**Key Take-Away:**

Demand (2010-2030)      700%+

# HEALTHCARE REFORM

**US healthcare spending is not correlated to outcomes and is no longer sustainable.**

AVERAGE LIFE EXPECTANCY



SOURCE: The Advisory Board

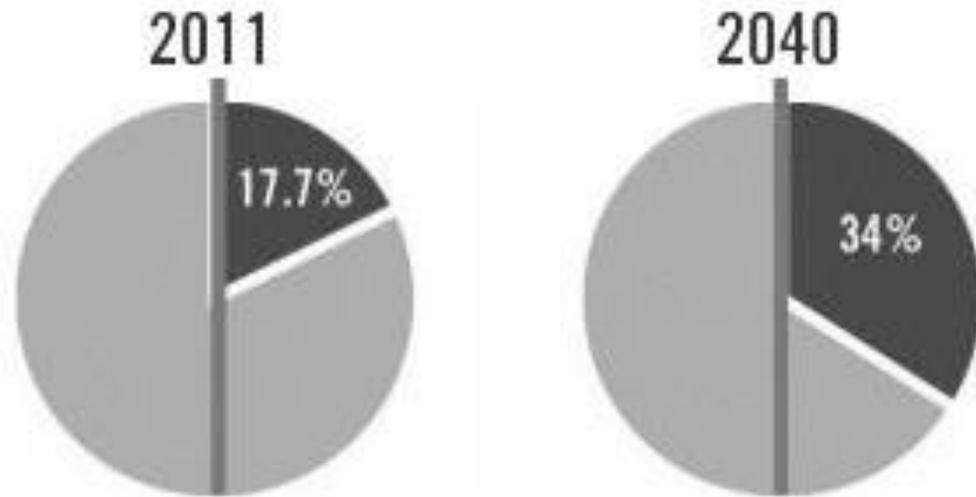
US HEALTH EXPENDITURES PER PERSON



**Key Take-Away:**  
Poorest outcomes at the highest cost

# HEALTHCARE REFORM

## HEALTHCARE, AS PERCENTAGE OF US GDP



SOURCE: The Advisory Board

**Key Take-Away:**  
Unsustainable Financial Burden

# HEALTHCARE REFORM

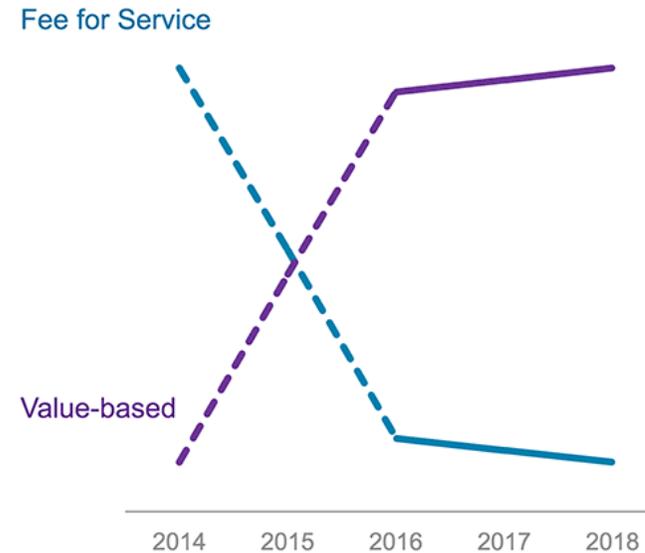


## Key Take-Away:

Externalities--What's good for HC may not be the primary motive

# REVENUE STREAM

- Single Payer
- Value-based model
- Universal Coverage
- Bundled Payments
- Risk Shifting
- ACOs  
(Accountable Care Organizations)
- MACRA  
(Medicare and CHIP Reauthorization Act of 2015)
  - APM (Alternative Payment Models)
  - MIPS (Merit-based Incentive Payment System)



Source: HHS Press Release, January 26, 2015

## HHS Value-Based Payment Goals

### 2016

30% of contracts will have alternative payment models (such as ACOs or bundled payments). 85% will be tied to quality or value through programs such as VBP or readmission reduction.

### 2018

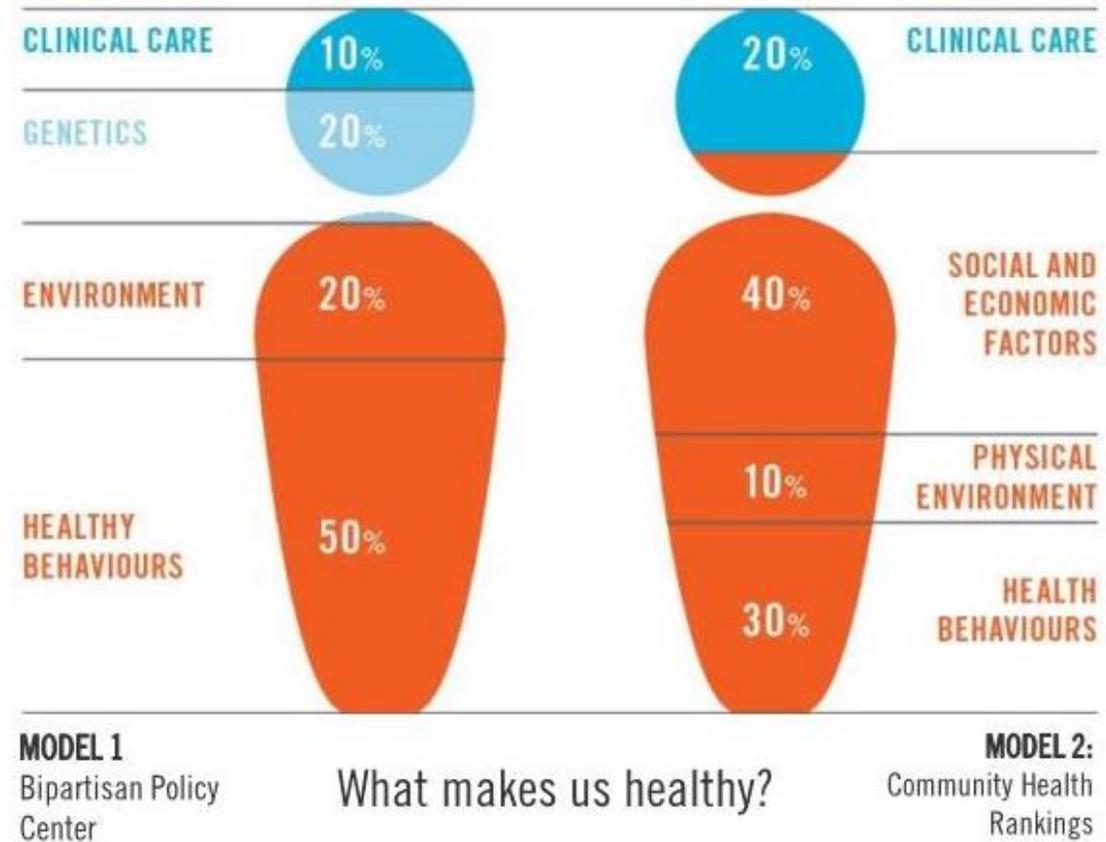
50% of contracts to be tied to alternative payment models and 90% to quality or value overall.

## Key Take-Away:

Revenue incentives are turning upside down

# SOCIAL DETERMINANTS

Quality clinical care counts as little as  
**10 or 20%**  
in overall health outcomes



GRAPHIC: Rick Hintz, AIA (Perkins+Will)

## Key Take-Away:

Health outcomes largely determined by factors outside the healthcare profession

# CLIMATE CHANGE



## Key Take-Away:

Intensity & Frequency: Hospitals failed when most in need

# CONSUMERISM

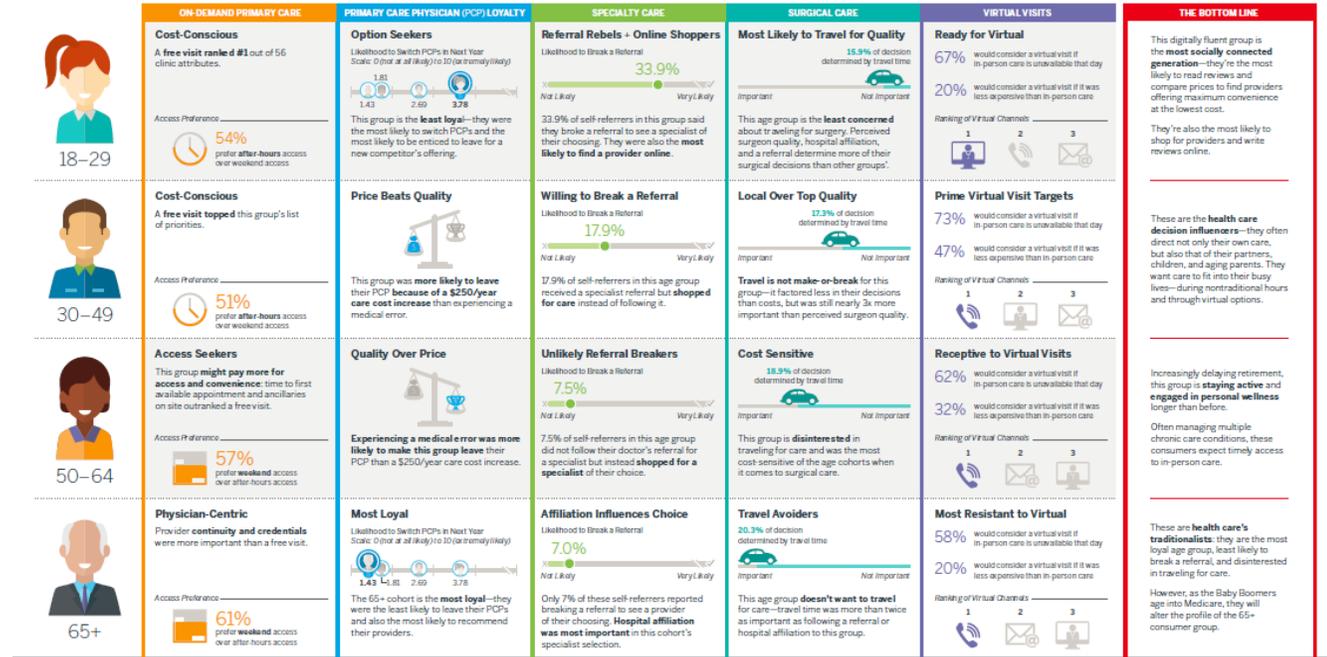
- Transparency
- Innovative/Disruptive driving changes in delivery
  - Insurance/Industry (non-traditional partners)
  - New services (community paramedics, telehealth)
  - New entrants (Chologaurd/self-monitoring and care)

- Access to knowledge/Informed buyers
- Increased accountability by care teams/services

## How Consumers' Health Care Preferences Vary by Age

Millennials, Gen X, Baby Boomers, the Silent Generation—you know they all consume care differently, but what exactly do each of these groups want? And how can you become their provider of choice?

We surveyed thousands of consumers across the United States to better understand their care expectations and found that **some of the most significant variations fell across age groups**. Here, we've segmented each of our five consumer choice surveys by age to help you tailor your messages and target your investments to different generations across the care continuum.



Advisory Board | Market Innovation Center

Explore more consumer survey results at [advisory.com/mic/consumerstrategy](https://advisory.com/mic/consumerstrategy)

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## Key Take-Away:

“One size fits all” in HC is going the way of Herberger's

# TECHNOLOGY

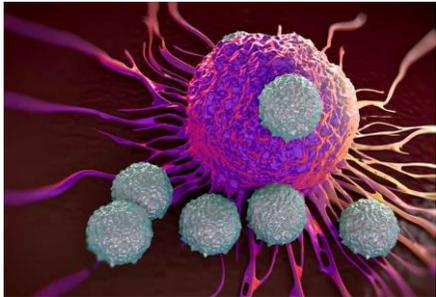
- Preventive Analytics
- Genomics
- Data (EHR) Analytics
- DNA Analytics
- Flu Predictions
- Crowd Sourcing Diseases
- Self-Testing
- Telehealth
- Less Invasive Procedures
- Drug Safety
- Evidence-Based
- AI and Robotics



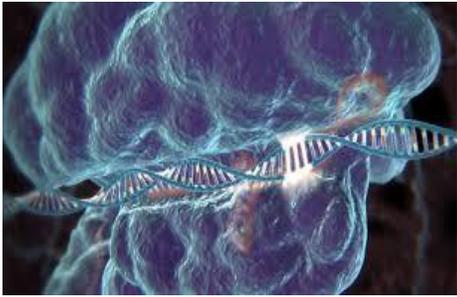
**Key Take-Away:**  
Technology is Pervasive

# RESEARCH BREAK-THROUGHS

CELLULAR IMMUNOTHERAPY



GENE EDITING



POINT OF CARE SEQUENCING



MICROBIOME CULTURE



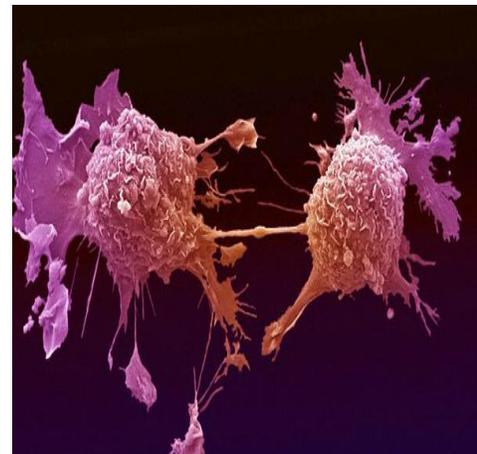
BIOSOLUBLE STENTS



KETAMINE DEPRESSION



LIQUID BIOPSIES



COCHLEAR IMPLANTS



## Key Take-Away:

Expedite, minimize, eliminate  
need for clinical interventions

# RESEARCH BREAK-THROUGHS

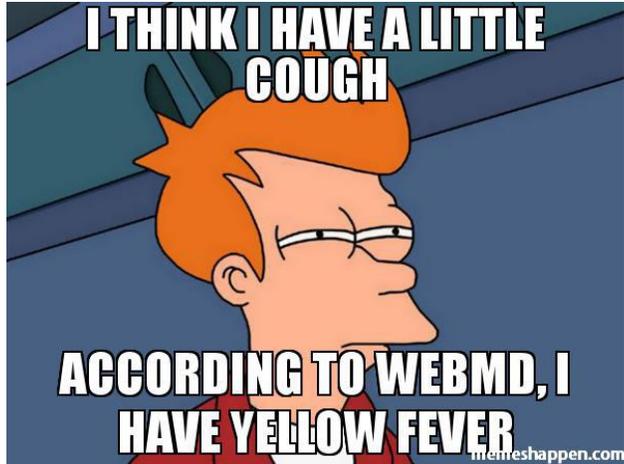
## EHR mining:

- Racial disparities in healthcare access
- County-by-county differences in how physicians treat common diseases
- Problems when children take adult medications
- Rates at which people experience drug side effects
- Early signs of difficult-to-diagnose conditions

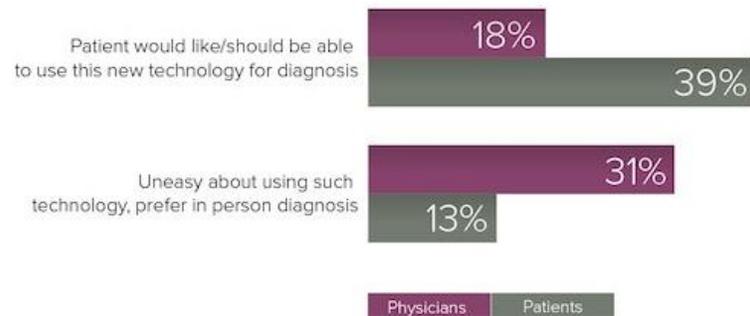
## Key Take-Away:

Breakthroughs are happening every day

# SELF-RELIANCE



Should Patients Be Able to Use Technology to Self-diagnose?

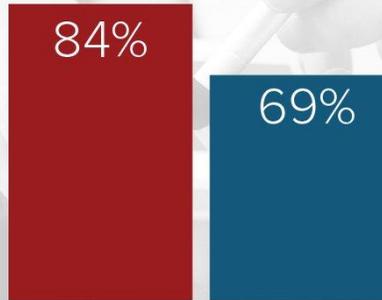


SOURCE: Medscape

## PATIENTS' USE OF TECHNOLOGY

Should technology be used by patients to assist in the diagnostic process?

YES



LEGEND: PATIENTS PHYSICIANS

SOURCE: Medscape

## Key Take-Away:

Consumers are more knowledgeable and want more control over their Healthcare

# SELF-RELIANCE

## Where We Are Now

Many doctors are using electronic health records.

Doctors, labs, pharmacies, and hospitals can store patients' health data electronically. This will help:

- Make your doctor visits faster
- Seamlessly coordinate your care among all your doctors
- Allow you to be in full control of all your medical data



**2 out of 3 people** would consider switching to a physician who offers access to medical records through a **secure Internet connection**<sup>2</sup>

What can you do with access to your health record?



Check to make sure your information is correct and complete



Keep track of important health information (e.g., vaccination records and test results)



Have your medical history available if you are changing doctors or visiting a specialist



Keep track of all your medicines and dosages

Having electronic access to your medical record can help you better manage your health.

**80%**

Americans who have access to their health information in electronic health records use it<sup>3</sup>



**65%**

Americans who don't have electronic access to their health information say it's important to have it<sup>4</sup>

E-health tools and mobile devices can help you better manage your personal health and wellness.

**17 million**

Number of consumers using mobile devices to access health information in 2011<sup>5</sup>



**27%**

Adults who use the internet have tracked the following:<sup>6</sup>



weight



diet



exercise routines



health indicators



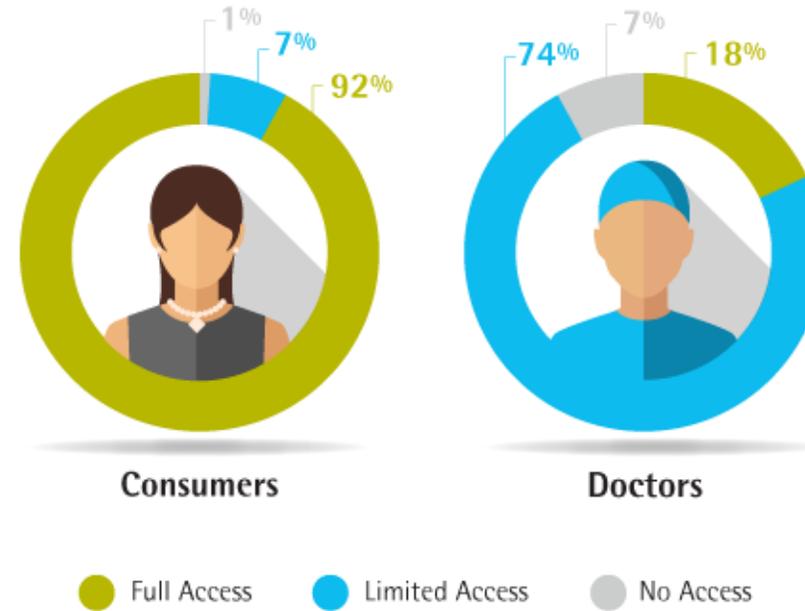
symptoms



People who are **more engaged** in their health actually get **better health care**<sup>7</sup>



Level of access a patient should have to EHR

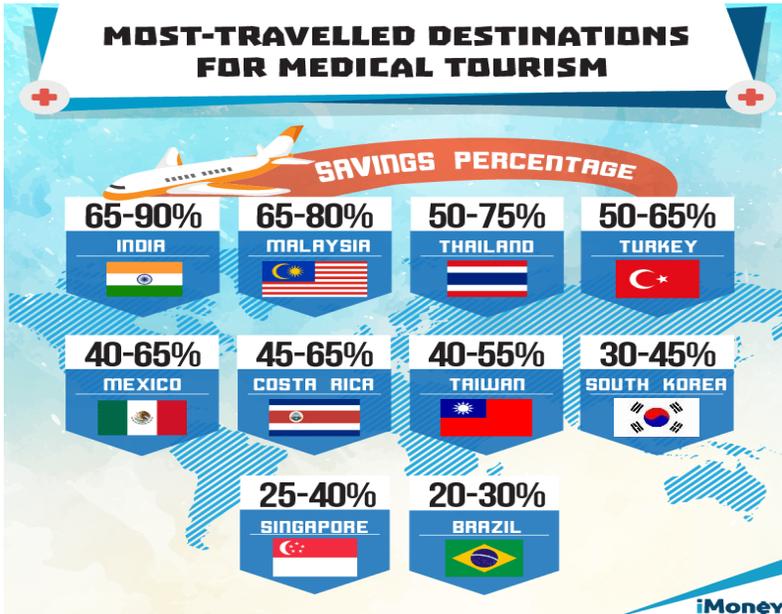


Source: Accenture 2016

## Key Take-Away:

Consumers are more knowledgeable and want more control over their Healthcare

# FLAT-WORLD PHENOMENA



**Key Take-Away:**  
Global market: Comparable expertise/results at half the cost

# DISCUSSION

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# RESPONSE – PROVIDER INITIATIVES

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Alliances

Gamification

Continuum of  
Care

Speed to Market

**Holistic Med**

EMR Telehealth

Community  
Engagement

Wellness

Data Analytics

De-Siloing

Transparency

"Person"-  
Centered Care

Robotics

Chronic Care  
Management

Staff Engagement

Self-Testing

Home Care

Visible Leadership

New Revenue Sources

Cooperative Care

**FACILITY:**  
ENABLING STRATEGY

Data Analytics

**Health Villages**

Core Concept

Resiliency

Safe Havens

Areas of Respite

Positive Distraction

Modularity

Daylighting

Micro Hospitals

Benchmarking

Resource Tracking

Flexibility

**Mock-ups**

GIS Mapping

Sense of Place

Intuitive

**Lean**

Wayfinding

ROI

Prefabrication

COEs

Analysis

**Simulations**

Experience Mapping

STANDARDIZATION

**Branding**

**CAUSE:**  
EXTERNAL  
DRIVER OF CHANGE

Social Determinants

**Consumerism**

Climate Change

Demographics

Research

Break-Throughs

Technology

Revenue  
Stream

Self-Reliance

FLAT-WORLD  
PHENOMENA

**RESPONSE:**  
PROVIDER INITIATIVE

For-  
Profits

Non-  
Profits

New  
Players

Group  
Practices

Indies

Change Management M&As  
Biometrics IoT Non-Traditional  
Partners

**Population  
Health**

Disaster Preparedness

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WHAT IS ~~THE HOSPITAL~~ HEALTHCARE OF THE FUTURE?

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# DISCUSSION

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