

# VBHC Working Session 2018

With Dr. Richard Bohmer & Prof. Matthew Cripps



**Call for Action I:** Build VBHC leadership to change the culture towards appreciation of value



**Call for Action II:** Continue building IPUs across institutions with medical leaders as the dominant driving force and managers as enablers



**Call for Action III:** Let the Dutch government enforce the use of outcome measures like ICHOM's minimum international set, since no stakeholder coalition seems to be able to take the lead



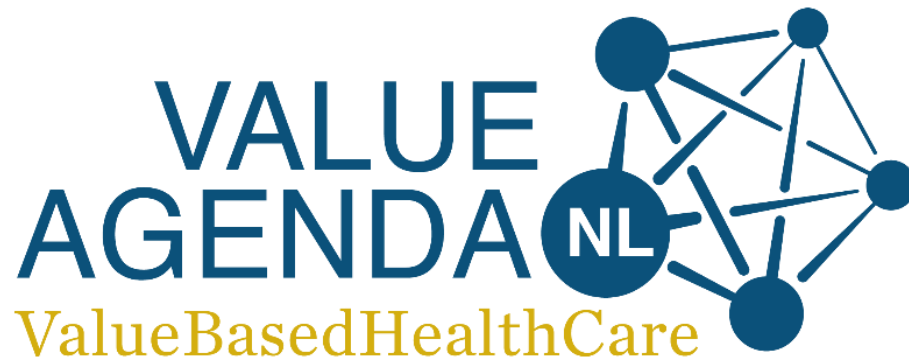
**Call for Action IV:** Move quickly to bundled payments for all care, away from the current mix of Fee For Service/DOT and capitation based payments, to break wrong incentives



**Call for Action V:** Engage patients to choose care providers based on quality



**Call for Action VI:** Build IPUs to better cater for patients with multi-morbidity



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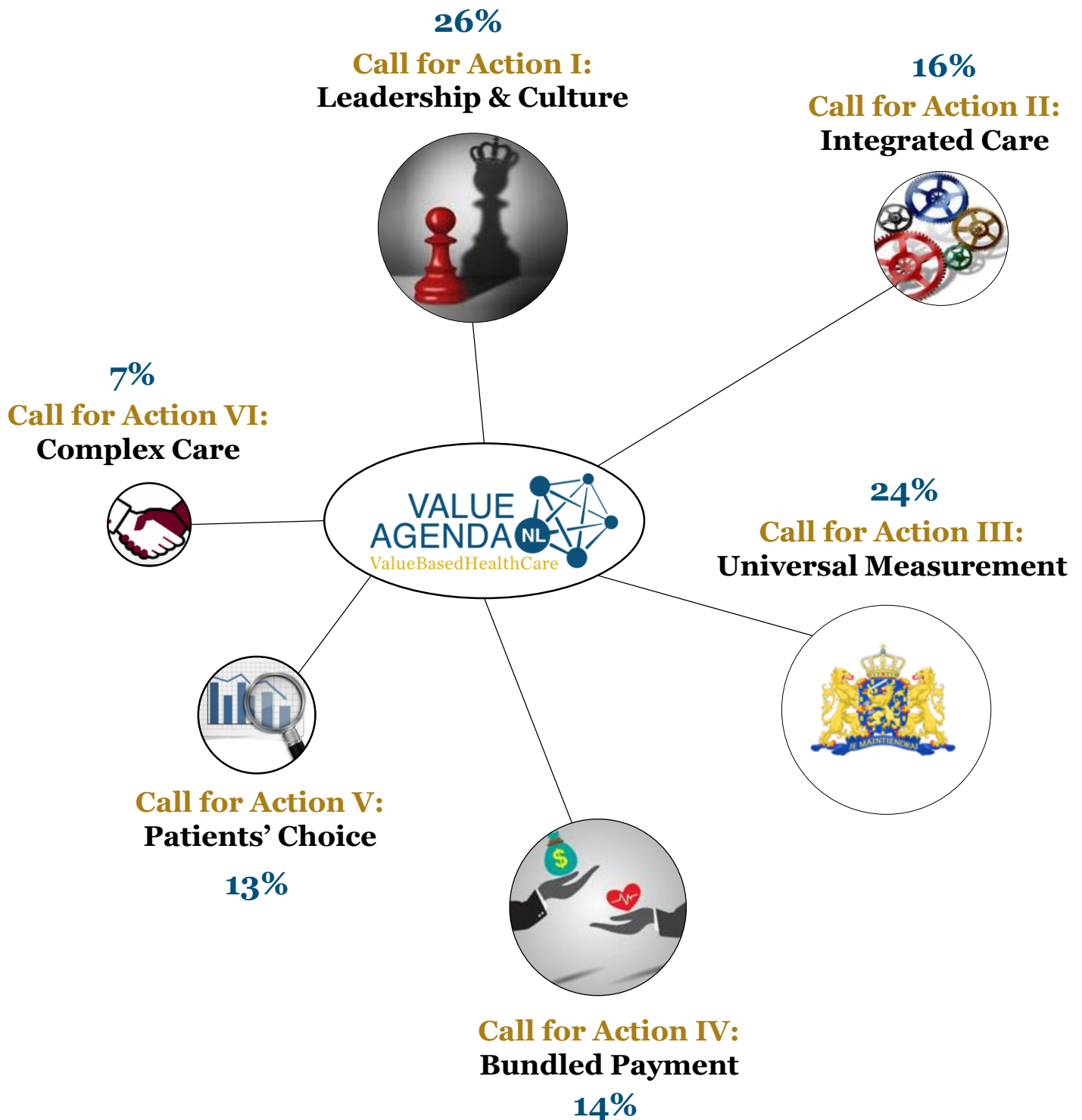
*'I want all of you leaders in health care in the Netherlands to participate. This is the opportunity that we have to pull together the best thinking, the best practice, the most interesting organizations. This will move the world.'*

- Professor Michael. E. Porter, Value-Based Health Care expert Working Session 2017 -

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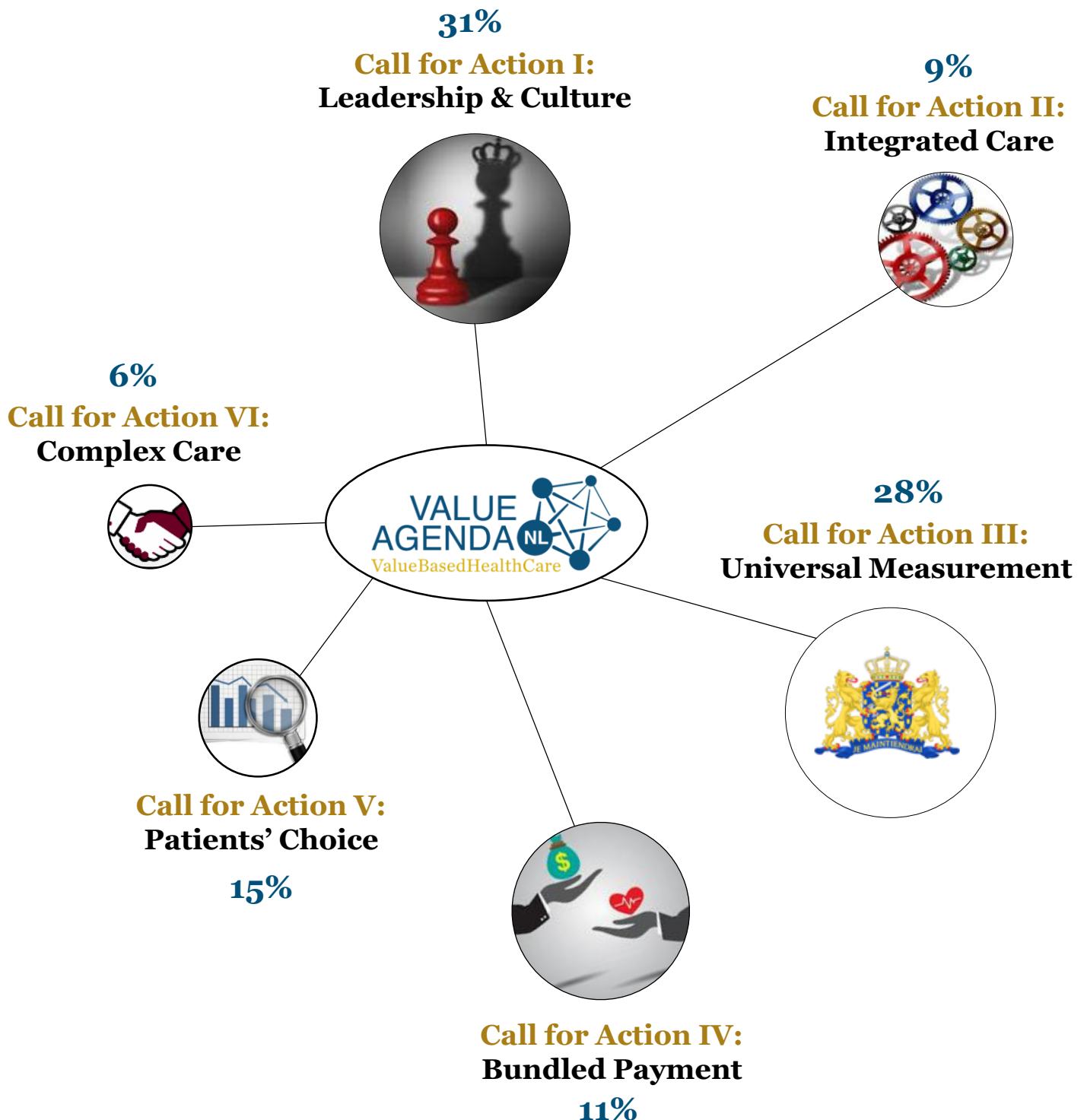
## Calls for Action Last year's observed progress



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## Calls for Action Highest future potential





- For discussion purposes -

## Care Providers – board/management

### Hurdles/Challenges

1. How to increase understanding/knowledge of Value-Based Health Care?
2. How to address/reduce skepticism on whether Value-Based Health Care works in practice?
3. What can we do from our position to increase trust towards other stakeholders?
4. How can we ensure that Value-Based Health Care is permanently on the agenda of our senior executives?
5. How can we ensure collective financial accountability?
6. How to unlock capacity at medical teams to drive change (because of full occupation)?
7. How can we increase transparency on outcomes for all medical specialties?
8. How to deal the renewal of the budget agreement (headline agreement) with a focus on controlling expenditures and volume?
9. How to stimulate scientific support?
10. How to enable medical teams to deliver Value-Based Health Care?
11. How to train healthcare professionals on working in integrated care settings?
12. How to align evidence-based medicine, VBHC, population health management a.o.?

## Care providers – (para)medical team

### Hurdles/Challenges

1. How to increase understanding/knowledge of Value-Based Health Care?
2. How can we ensure Value-Based Health Care is permanently on the agenda of our senior executives?
3. How to address/reduce skepticism on whether Value-Based Health Care works in practice?
4. How to increase the skills and courage of the medical teams needed for implementation?
5. How to make time to drive change towards appreciation of value while fully occupied in patient care?
6. How to increase clinical leadership in primary care?
7. How to address the anxiety of medical doctors (“I am losing patients”)?
8. How to align incentives for improving value for patients?
9. How to align on what value is?
10. How to build history/track record to show progress instead of a snapshot in time?
11. How to motivate the entire medical team to deliver Value-Based Health Care?
12. How to disseminate best practices from successes in integrated care delivery/settings?
13. How to (further) increase transparency on outcomes?

## Care/patient associations a.o.

### Hurdles/Challenges

1. How to increase understanding/knowledge of Value-Based Health Care?
2. How can we ensure Value-Based Health Care is permanently on the agenda of our senior executives?
3. How to address/reduce skepticism on whether Value-Based Health Care works in practice?
4. How to disseminate that value in health care is not similar everywhere and for everyone (and so is the value created) to society?
5. What can we do to change focus from volume and price per treatment to outcomes and integral costs per patient episode?



- For discussion purposes -

## Stimulators/Enablers (government + IT)

### Hurdles/Challenges

1. How to increase understanding/knowledge of Value-Based Health Care?
2. How can we ensure Value-Based Health Care is permanently on the agenda of our senior executives?
3. How to address/reduce skepticism on whether Value-Based Health Care works in practice?
4. How to create public awareness that value in health care is not similar everywhere and for everyone?
5. How to align the execution of strategies between care/cure providing organizations?
6. How to incorporate Value-Based Health Care in medical school?
7. How to educate medical teams and supporting staff on leadership and Value-Based Health Care?
8. How to deal the renewal of the budget agreement (headline agreement) with a focus on controlling expenditures and volume?

## Health insurers

### Hurdles/Challenges

1. How to increase understanding/knowledge of Value-Based Health Care?
2. How can we ensure Value-Based Health Care is permanently on the agenda of our senior executives?
3. How to address/reduce skepticism on whether Value-Based Health Care works in practice?
4. How can we stimulate transparency of outcomes?
5. How to improve our capabilities on change management?
6. How to increase focus on Value-Based Health Care at purchasing of care?
7. How to reward patients to choose for superior care providing organizations?
8. How to align evidence-based medicine, VBHC, population health management a.o.?
9. How to stimulate medical teams to collaborate in prevention of care?

## Medical Industry

### Hurdles/Challenges

1. How to increase understanding/knowledge of Value-Based Health Care?
2. How can we ensure Value-Based Health Care is permanently on the agenda of our senior executives?
3. How to address/reduce skepticism on whether Value-Based Health Care works in practice?
4. How can we honestly and actively reduce mistrust?
5. How to alter the conversation on products and costs towards value created?
6. How to educate medical professionals on Value-Based Health Care without any obligation?
7. How to show organizational focus on value?
8. How to collaborate with other medical industries in favor of patient value?



- For discussion purposes -

## Care Providers – board/management

### Hurdles/Challenges

1. How to establish a bundled payment involving multiple institutions that provide care along the patient journey?
2. How to shift disutility of the patient to disutility of the physician?
3. How to stimulate the move towards disease and sector focused IPU's?
4. How to deal with physical relocation restrictions?
5. How to take responsibility and take charge?
6. How to tackle the conflicts of interest within the organization?
7. How to address the anxiety of medical physicians ('I am losing patients')?
8. How to incentivize medical teams to build IPU's?
9. How to establish a common IT-platform that accelerates integration of care?
10. How to establish a mental shift to focus on financial effect on patient episode, not day of work and services?
11. How to work around the current Diagnosis Treatment Combination (DTC) structure?

## Care providers – (para)medical team

### Hurdles/Challenges

1. How to align physicians to collaborate instead of focus on their part of treatment?
2. How to start collaborations with other teams to scale up (as the Netherlands is too small)?
3. How to have outcomes available all involved during the patient journey?
4. How to involve healthcare professionals from the start of transformation towards integrated care?
5. How to incentivize the entire medical team (across various disciplines) to build IPU's?
6. How to get professional training and education on building an IPU?
7. How to shift disutility of the patient to disutility of the physician?
8. How to get the entire medical team and staff aligned?

## Care/patient associations a.o.

### Hurdles/Challenges

1. How to help scaling of IPU's including more care providing organizations than solely a hospital?
2. How can we inspire the full range of medical specialties and staff to align on this integrated way of care delivery?
3. How to extract patient preferences on patient-centered care delivery to better organize care logistically?
4. How to stimulate collaboration between various care providing organizations?
5. How to improve sharing best practices between care providers?
6. How to help with centralization of care delivery, and push care providers to choose and/or focus?
7. How to establish a common IT-platform that accelerates integration of care?





- For discussion purposes -

## Stimulators/Enablers (government + IT)

### Hurdles/Challenges

1. How to make clear decisions on which care provider to contract, based on value created and type of care provided?
2. How to increase focus on contracting parties that are part of a functional IPU?
3. How to stimulate reimbursement over a full cycle of care instead of reimbursement of silo's (/services)?
4. How to fund integrated care between primary and secondary care?
5. How to reward well-functioning IPUs?
6. How to facilitate pilot projects in setting up an IPU for a medical condition?
7. How to improve coordination and scheduling highly structured to allow for higher feasibility of an IPU?

## Health insurers

### Hurdles/Challenges

1. How to address the anxiety of medical doctors ('I am losing patients')?
2. How to incentivize care providing organizations and medical teams to build IPU's?
3. How to establish a bundled payment involving multiple institutions that provide care along the patient journey?
4. How to make clear decisions on which provider to contract based on value created and type of care provided?
5. How to increase focus on contracting parties that are part of a functional IPU?
6. How to break down barriers between payers (insurer vs. insurer and insurance vs. local government)?

## Medical Industry

### Hurdles/Challenges

1. How to be part of an integrated care cycle?
2. How to innovate beyond products and services towards solutions?
3. How to actively stimulate medical leaders to drive the foundation of IPU's?
4. How to stimulate medical teams to include purchasers of care in the IPU?
5. How to move beyond product development to create solutions that help building the IPU?
6. How to help with the (development of an) assessment of value delivered over a full cycle of care?



- For discussion purposes -

## Care Providers – board/management

### Hurdles/Challenges

1. How to increase data to measure and manage outcomes?
2. How to ensure time and motivation of the medical team and staff to measure outcomes?
3. How to translate ICHOM sets to the Dutch context?
4. How to experiment with ICHOM sets?
5. How to implement universal electronic systems to measure (track/report etc)?
6. How to enforce outcome measurement in a constructive way?

## Care providers – (para)medical team

### Hurdles/Challenges

1. How to increase adoption of outcomes sets or practices that are developed elsewhere (and not only adopt what is invented in-house)?
2. How to move forward quickly and pragmatically as ICHOM sets are still quite extensive?
3. How to implement an ICHOM standard set?
4. How to increase data to measure and manage outcomes?
5. How to deal with other mandatory registrations?
6. How to tackle the discussion on bureaucracy in health care?
7. How to develop and ensure the availability of generic PROMs to be used?
8. How to engage all healthcare professionals?
9. How to translate ICHOM sets to the Dutch context?
10. How to choose the most valuable indicators?
11. How to create meaningful dashboards with feedback to medical teams/professionals?
12. How to align team on outcomes when enforced by government, management or physician?

## Care/patient associations a.o.

### Hurdles/Challenges

1. How to reduce the (mandatory) measurement of process/structure indicators?
2. How to create a national database/platform on outcomes (and reduce fragmentation)?
3. How to make sure that a leading role of the government in establishing a universal measurement is accepted?
4. How to assist in capturing the right outcome measures for complex and chronic diseases?
5. How to ensure that powerful parties can counter any possible resistance?
6. How to limit the registration burden for patients to remain feasible?
7. How to develop and ensure the availability of generic PROMs to be used?
8. How to engage patients (and patient organizations)?
9. How to translate ICHOM sets to the Dutch context?

- For discussion purposes -

## Stimulators/Enablers (government + IT)

### Hurdles/Challenges

1. How to reduce the (mandatory) measurement of process/structure indicators?
2. How to create a national database/platform on outcomes (and reduce fragmentation)?
3. How to make ICHOM data a main or major condition of contracting?
4. How to align software use for the implementation of ICHOM sets?
5. How to deal with the differences in content/quality of the various ICHOM sets with regards to implementation?
6. How to deal with the ownership of the ICHOM datasets? Should one stakeholder be the 'owner' of the datasets and take the lead in implementing these standard sets?
7. Can we invigorate the use of outcome measures with a comprehensive theoretical model?
8. Should we integrate care research budgets?
9. How to implement an ICHOM standard set?
10. How to formally endorse the use of outcome sets?
11. How to translate ICHOM sets to the Dutch context?
12. How to take position and make clear to society and healthcare professionals who is taking position (various roles of each entity)?

## Health insurers

### Hurdles/Challenges

1. How to make ICHOM data a main or major condition of contracting?
2. How to increase data to measure and manage outcomes?
3. How to develop and ensure the availability of generic PROMs to be used?
4. How to engage the entire organization in outcome measurement?
5. How to translate ICHOM sets to the Dutch context?
6. How can insurers cooperate to align on outcome sets?
7. How to capture the right outcome measures for complex and chronic diseases?
8. How to monitor long-term outcomes of value-based contracts?

## Medical Industry

### Hurdles/Challenges

1. How to contribute to the taskforce selected by the ministry of health to increase availability of outcomes set?
2. How to scale-up the implementation of ICHOM sets at care providing organizations?
3. How to include outcome measures in the (pre)clinical trial phase?
4. How to ensure quick market entry of highly effective medical solutions by showing clinical relevance on outcomes?
5. How to assist in the development of outcome measures for high burden, high volume and/or highly complex diseases?
6. How to assist the Ministry of Health to succeed in having 50% of care transparently measured by 2021?



- For discussion purposes -

## Care Providers – board/management

### Hurdles/Challenges

1. How to incorporate outcomes in contracts?
2. How to unravel the black box of costing (for specific care pathways)?
3. How to make sure bundled payments are not seen as a separate goal but as a way to make progress towards paying for value?
4. How to negotiate long-term contracts for chronic diseases?
5. How to cope with fragmentation of healthcare delivery and payers?
6. How to move away from siloed budgeting?
7. How to expand bundled payments beyond the disease focus approach?
8. How to prevent fragmented care from organizational orientation?
9. How to facilitate integrated care by bundled payment?
10. How to choose from a range of alternative reimbursement models that focus on rewarding value?

## Care providers – (para)medical team

### Hurdles/Challenges

1. How to unravel the black box of costing (for specific care pathways)?
2. How to negotiate long-term contracts for/on chronic diseases?
3. How to be held accountable by payers for results/ambitions on outcomes that are not met?
4. How to make sure the cost price is determined right and in a uniform way?
5. How to move away from siloed budgeting?
6. How to cope with fragmentation of health care delivery and payers?
7. How to be able to report casemix corrected outcome data to compare?
8. How to increase trust towards insurance companies?
9. How to stimulate acceptance of outcome based payments vs. effort based payments?
10. How to establish stability from NZa (Dutch Health Authority) on payment structures?
11. How to make sure that the cost discussion does not distract the focus on value?

## Care/patient associations a.o.

### Hurdles/Challenges

1. How to ensure that outcomes are tied to the bundled payment contract?
2. How to disseminate the best practices of bundled payments?
3. How to ensure that patient engagement and involvement is secured and not neglected?
4. How to generate comparable data for patients?
5. How to make sure that cost discussion does not distract the focus on value?
6. How to engage all care providing organizations to take part in the bundled payment agreement?
7. How to create a general overarching partnership with insurers to easily create new bundles for care.



- For discussion purposes -

## Stimulators/Enablers (government + IT)

### Hurdles/Challenges

1. How to change legislation to allow the coupling of individual outcome data with cost information?
2. How to calculate risk and casemix for providers to enable full risk-sharing?
3. How to make sure that bundled payments will not develop towards a disguised fee-for-service system/model?
4. How to cope with fragmentation of healthcare delivery and payers?
5. How to move away from siloed budgeting?
6. How to expand bundled payments beyond the disease focus approach?
7. How to make sure bundled payments are not seen as separate goal but as a way to make progress towards paying for value?
8. How to adjust data exchange system towards this new reimbursement system?
9. How to establish stability from NZa (Dutch health Authority) on payment structures?
10. How to facilitate integrated care by bundled payment?

## Health insurers

### Hurdles/Challenges

1. How to include quality, benchmarks and improvement systems into bundled payments?
2. How to determine the best contract partner from care providing organizations?
3. How to reward and punish unmet contract results?
4. How to create an incentive to move towards bundled payments?
5. How to negotiate long-term contracts for chronic diseases that reward value?
6. How to calculate risk and casemix for providers?
7. How to make sure that bundled payments will not develop towards a disguised fee-for-service system/model?
8. How to cope with fragmentation of healthcare delivery and payers?
9. How to move away from siloed budgeting?
10. How to increase trust of care providers?
11. How to counteract the connotation of bundled payments unfair due to cherry picking and excluding complex patients.
12. Should we start in pilot settings for care programs with smart Key Performance Indicators (KPI's) to measure advantages to share and learn?
13. How to develop 'standard' bundles of care from experience
14. How to unravel the black box of costing (for specific care pathways)?
15. How to facilitate integrated care by bundled payment?

## Medical Industry

### Hurdles/Challenges

1. How to become an integral part of the bundled payment?
2. How to get reimbursed from the bundle on value delivered?
3. How to prevent that the cheapest products are bought to maximize profit per patient journey?
4. How to reward the medical team for realizing superior outcomes (independent from product used)?
5. How to assist the medical team to standardize processes with low complexity/variation (increase efficiency)?
6. How to bear financial risk of hospitals (insurance) when starting bundled payment?



- For discussion purposes -

## Care Providers – board/management

### Hurdles/Challenges

1. How to address resistance of patients/physicians in this change towards other quality measures?
2. How to make transparency on outcomes and participation mandatory?
3. How to establish pro-active patients that choose on (preferred) quality not on proximity of care or relation with the physician?
4. How to handle mistrust of information?
5. How to report outcomes towards Dutch citizens in an understandable way?
6. How to enable smart specialization of hospitals?
7. How to improve ways to easily refer patients towards other care providers in the region and nationally?

## Care providers – (para)medical team

### Hurdles/Challenges

1. How to show meaningful and honest information on outcomes to patients to improve shared decision making?
2. How to increase willingness from medical professionals to show patient relevant performance?
3. How to make patients aware of good quality and what the minimum required level of quality is?
4. How to make transparency on outcomes and participation mandatory?
5. How to establish pro-active patients that choose on (preferred) quality not on proximity of care or relation with the physician
6. How to address resistance to quality measures best?
7. How to make outcome data available, accessible and understandable for patients to choose?
8. How to secure that outcome data which really matters is available?

## Care/patient associations a.o.

### Hurdles/Challenges

1. How to establish a national platform/database on outcomes?
2. How to increase willingness from medical professionals to show patient relevant performance?
3. How to establish pro-active patients that not always choose local and 'same old'?
4. How to make patients aware of good quality and what the minimum required level of quality is?
5. How to ensure that payers make choices on value delivered to patients?
6. How to educate patient on large quality differences between care providing organizations?
7. How to handle mistrust of information?
8. How to make outcome data available, accessible and understandable for patients to choose?
9. How to increase willingness at patients to be guided towards superior care provider?
10. How to secure that outcome data which really matters is available (platform)?
11. How to stimulate patient empowerment?
12. How to increase health literacy of society?



- For discussion purposes -

## Stimulators/Enablers (government + IT)

### Hurdles/Challenges

1. How to increase health literacy of society?
2. How to address resistance of patients/physicians to quality measures best?
3. How to make transparency on outcomes and participation mandatory?
4. How to ensure that payers make choices on quality of care delivered?
5. How to establish pro-active patients that choose on (preferred) quality not on proximity of care or relation with the physician?
6. How to arrange that patients own and have access to their medical data?
7. How to increase competition with four major health insurers?
8. How to run national campaigns via the government to engage citizens and choose care provider based on quality (postbus 51)?
9. How to make use of national and governmental media to disseminate results of IPUs?

## Health insurers

### Hurdles/Challenges

1. How to make transparency on outcomes and participation mandatory?
2. How to make choices on quality of healthcare delivered?
3. How to address resistance of patients/doctors to quality measures best?
4. How to make investment decisions that are based on health outcomes achieved (spend a euro on high quality diabetes or high quality oncology)?
5. How to handle mistrust of information?
6. How to make outcome data available, accessible and understandable for patients to choose?
7. How to secure that outcome data that really matters is available?

## Medical Industry

### Hurdles/Challenges

1. How to extract patient preferences on outcomes to develop solutions that match patients' demand?
2. How to assist care providers to assess and show the value created over a full cycle of care?
3. How to make sure that expensive drugs reach the right patients?
4. How to ensure that physicians can prescribe the patients best possible/preferred medicine?
5. How to increase collaboration with other manufacturers to match right products with patient based on value created?





- For discussion purposes -

## Care Providers – board/management

### Hurdles/Challenges

1. How to stratify patients on similar medical/care needs?
2. How to build pressure to change?
3. How to ensure that high variety of medical specialties are all included and the capacity of each specialty is managed?
4. How to increase scientific support for complex care?
5. How to incentivize physicians to focus on complex care?
6. How to appoint who is in charge?
7. How to increase/attract funds for investment(s)?
8. How to establish a coordinating function across the care delivery cycle?
9. How to manage expectations of medical teams as improving complex care is not an overnight process but a long-term strategy?
10. How to reorganize current hospital care for complex care?

## Care providers – (para)medical team

### Hurdles/Challenges

1. How to incentivize medical teams to change?
2. How to scale up primary care organizations to cater multi-morbidity patients (and focus on prevention)?
3. How to ensure trustful and meaningful data?
4. How to keep large multidisciplinary teams manageable and well organized?
5. How to generate insight in patient relevant outcomes for such diverse groups?
6. How to increase scientific support for complex care?
7. How to measure the impact of each underlying conditions on outcome (casemix)?
8. How to appoint who is in charge (leading IPU or physician)?
9. How to build pressure to change?
10. How to cater patients on similar medical/care needs?
11. How to organize care with a single care manager overseeing and coordinating the entire care process?
12. How to increase integration of primary, secondary care and elderly care organizations?

## Care/patient associations a.o.

### Hurdles/Challenges

1. How to build pressure to change?
2. How to make funds available to invest?
3. How to educate patients with multi morbidity to better self-manage their disease?
4. How to increase focus on preventive care?
5. How to stimulate primary care physicians to take the lead to manage high risk patients (more) pro-actively?
6. How to extract the medical need of patients for better management/monitoring of their medical condition?





- For discussion purposes -

## Stimulators / Enablers (government + IT)

### Hurdles/Challenges

1. How to align focus with health insurers?
2. How to technically manage outcome data with such large underlying variation?
3. How to build pressure to change?
4. How to make funds available to invest?
5. How to move away from fragmented budgets in primary and secondary care?
6. How to integrate and make use of predictive models to better manage high-risk patients?

## Health insurers

### Hurdles/Challenges


1. How to build pressure to change?
2. How to incentivize physicians to focus on complex care?
3. How to scale IPU's beyond walls of hospital to truly integrate care?
4. How to convince care providing organizations that complex care is essential to manage and increase collaboration with primary care?
5. How to make funds available to invest?
6. How to align focus with municipalities?
7. How to allow care providers to take more risk medically while maintaining financial certainty?

## Medical Industry

### Hurdles/Challenges

1. How to develop new services and solutions targeted on medical needs of patients?
2. How to move from unmet medical needs to 'cure' towards unmet medical needs to 'care' (managing and monitoring) and 'prevent'?
3. How to move from making products that cure to solutions that prevent?
4. How to develop economic evaluation or theoretical framework to identify valuable solutions for high risk, high costs patients?
5. How to create tools to make better use of data to predict and manage complex care?
6. How to stimulate capabilities of care providers to better manage multi morbidity patients?
7. How to help care providers with investments to improve and implement a solid IT infrastructure to better manage complex care (standardize less complex parts of care for high complex patients)?

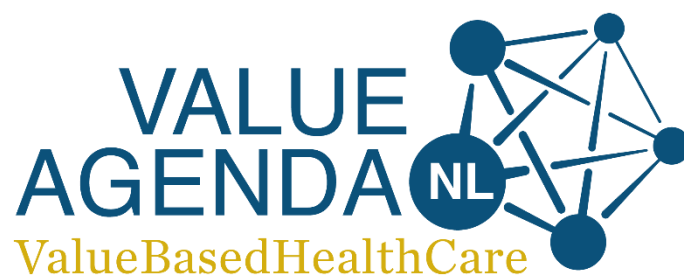
VALUE  
AGENDA **NL**  
ValueBasedHealthCare

A network diagram consisting of several dark blue circular nodes connected by thin dark blue lines, forming a complex web-like structure.

Thank you for your participation

# VBHC Working Session 2018

With Dr. Richard Bohmer & Prof. Matthew Cripps



This exclusive Working Session with Dr. Richard Bohmer and Prof. Matthew Cripps is organized by three content-based partners in VBHC who are eager to move VBHC forward collaboratively:



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