

Integration of Health and Social Care In the United States Margo Edmunds, PhD AcademyHealth, Washington, DC, US

HSR-UK Symposium 2016 Nottingham, England



Vision

AcademyHealth envisions a future where individuals and communities are made healthier by the use of evidence in decision-making.

Mission

Together with its members, AcademyHealth works to improve health and the performance of the health system by supporting the production and use of evidence to inform policy and practice.



Today's Goals

- Provide a policy overview of integration in the US
 - Give examples of interesting and/or successful practices from public and private sectors
 - Highlight future trends and influences
 - Suggest drivers and enablers of integration
- → Q and A with Dr. Wistow



Key Events in Social Determinants of Health in US

- → 1990 Healthy People 2000 (HHS)
- → 1994 McGinnis JM and Foege W, Actual Causes of Death in the US (JAMA)
- 2003 Unequal Treatment: Confronting racial/ ethnic disparities in health care (IOM)
- Affordable Care Act says national QI strategy should address disparities and population health
- → 2011 Bradley reports ratio of health to social spending influences health outcomes (BMJ)
- > 2014 Robert Wood Johnson Foundation commits
 \$500 million to Culture of Health programming

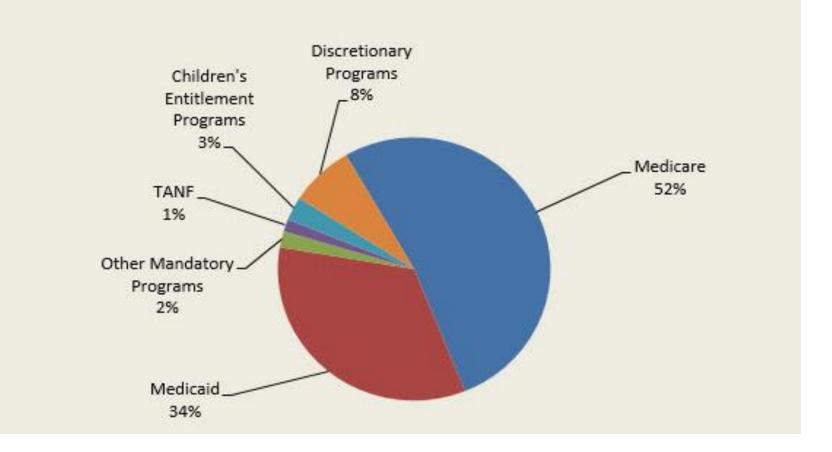




US HHS www.healthypeople.gov



FY 2017 Budget US Dept. HHS



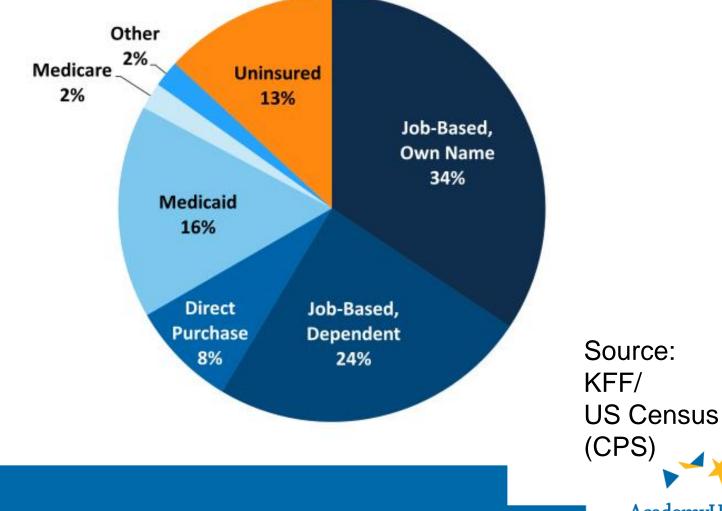


Balance of Powers

- Structure of Federal Government
 - Executive Branch (President and Dept. HHS)
 - Legislative Branch (Congress)
 - Judicial Branch
- US Constitution grants authority over health to states, not federal government
 - Licensing and credentialing providers (consumer protection)
 - Regulating insurance industry (rate-setting)
 - Expanding Medicaid



US Women's Health Insurance Coverage, 2014



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Wealthier, But Not Healthier

High-Income Countries Ranked by Life Expectancy at Birth

Country	Rank - Women	Average length of life	Rank - Men	Average length of life
Switzerland	3	84.09	1	79.33
Japan	1	85.98	3	79.20
Canada	7	82.95	6	78.35
UK	15	81.68	10	77.43
US	16	80.78	17	75.64

IOM, US Health in Intl Perspective, 2013



Social to Health Spending Ratio Influences Health Outcomes

Country	Health Services %	Social Services %	% of GDP
Sweden	12.1	25.5	37.6
United States	16	13.3	29.3
United Kingdom	8.2	20.4	28.6
Canada	10.3	13.9	24.2
Ireland	7.3	11.0	18.3
Mexico	5.8	4.5	10.3

Bradley et al., 2011

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Economic Burden of Health Inequities in the US

More than 30% of direct medical costs faced by African Americans, Hispanics, and Asian Americans are related to inequities in access to care, at a cost of \$230 billion over 4 years

• Source: LaVeist T, Gaskin D, Richard P (2009)

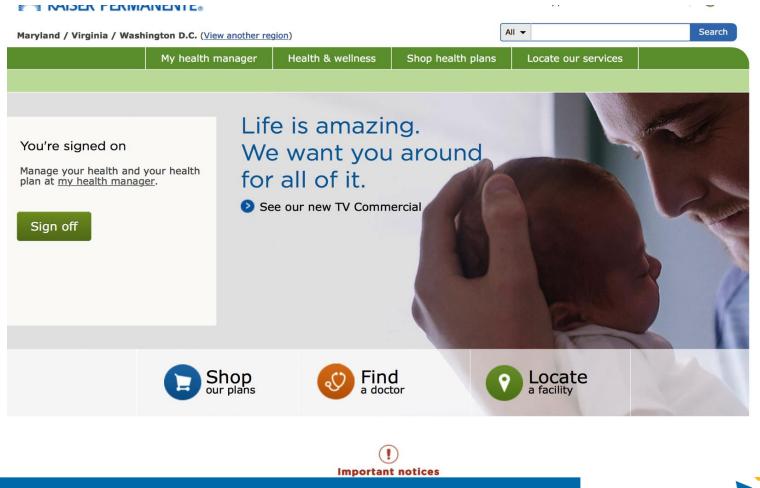
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Models of Integration: Bright Spots

- > Kaiser Permanente health system
- > Robert Wood Johnson Foundation
- Camden NJ Coalition
- Anchor institutions
- → ACOs



Kaiser Permanente www.kp.org



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"Philanthropy is commendable...

- "but it must not cause the philanthropist to overlook the circumstances of economic injustice which make philanthropy necessary."
 - Martin Luther King, Jr., Strength to Love. Fortress Press, 1963.



Robert Wood Johnson Foundation Culture of Health

- "Everyone deserves to live the healthiest life possible"
- Action Framework
 - Shared Value
 - Culture of Collaboration
 - Healthier Communities
 - Integrated Systems

» http://www.cultureofhealth.org

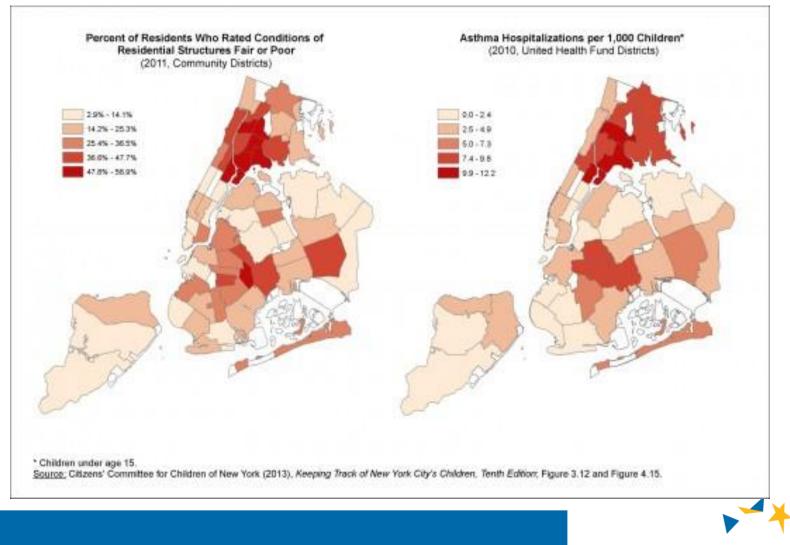


Healthcare Hotspotting

- Data-driven process to identify disease patterns and high costs
- > Place matters
 - Geospatial mapping tools
 - Importance of data visualization
- Camden Coalition of Healthcare
 Providers (NJ): Jeffrey Brenner
 - Toolkit: Healthcarehotspotting.com



Healthcare Hotspotting





Anchor Institutions





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How Hospitals Can Help Heal Communities

by Ted Howard and Tyler Norris

In this article for the Federal Reserve Bank of San Francisco's blog, Democracy Collaborative President Ted Howard and Kaiser Permanente Vice President for Total Health Partnerships Tyler Norris discuss the immense potential of hospitals to build wealth in their surrounding communities. In the article, Howard and Norris delve into issues addressed in their co-authored report, *Can Hospitals Heal America's Communities*? The Build Health Places Network also featured the article on their blog.



Nonprofit hospitals and health systems can no longer accept such disparities as facts of life. Clinical treatment and research, while vitally important, are simply insufficient to ensure the health of the communities they serve because poverty is the single largest contributing factor to poor health outcomes. That means a hospital that takes its health mission seriously needs to understand its responsibility to leverage its economic activity for community benefit whenever possible in partnership with others in its community... **Read full article.**

Parent Federal Reserve Bank of San Francisco
Publication:

Date: Mar 30 2016

External URL: http://www.frbsf.org/community-development/blog/how-hospitals-can-help-heal-comm...



Interoperability

- → 2001: IOM, Crossing the Quality Chasm
- > 2005: HHS Commission on Systemic
 Interoperability (Endingthedocumentgame.gov)
- > 2009: HITECH (Health Information Technology for Economic and Clinical Health)
- → 2010: Affordable Care Act (ACA)
- > 2015: Interoperability Roadmap (www.healthit.gov)

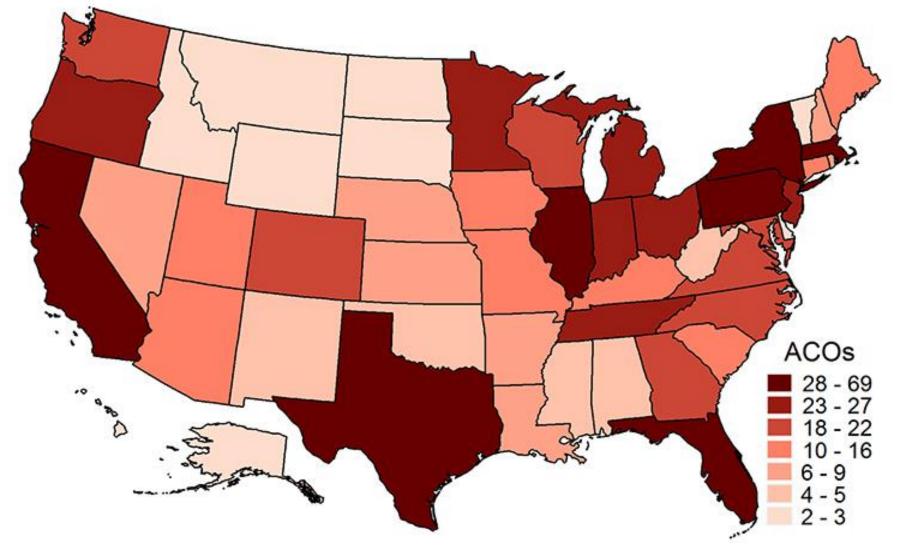


New Care Models in the Affordable Care Act (ACA)

- New "accountable care organizations (ACOs)" promote evidence-based medicine, patient engagement, report on quality and cost measures, coordinate care, and manage population health
- Medicare and Medicaid "health home" options for chronic care include remote monitoring (telehealth)



ACOs by State



Source: Health Affairs Blog, April 21, 2016



Consumer Engagement

- IOM report (2001): Patient centeredness is one of six quality domains
- ACA mandates use of measures of patient experience, engagement, and shared decision-making
- Creation of Patient-Centered Outcomes Research (PCORI) in 2010
- → Miles to go…



What Makes for Successful Integration?

- Cross-sector leadership/governance structures are in place and evolve
- Financing is sufficient and transparent
- Information systems infrastructure promotes data flow and exchange
- > Workforce is collaborative and engaged
- Shared vision: draw on diverse perspectives and communities



Additional Resources

- American Public Health Association.
 Better Health Through Equity (2015)
 - https://www.apha.org/~/media/files/pdf/topi cs/equity/equity_stories.ashx
- Anchor Institutions Toolkit (Netter Center, U of Pennsylvania https://www.nettercenter.upenn.edu/anc hortoolkit/what-anchor-institution)



Thank you!

