

# **Strengthening and Transforming Primary Care through a Team Based Approach**

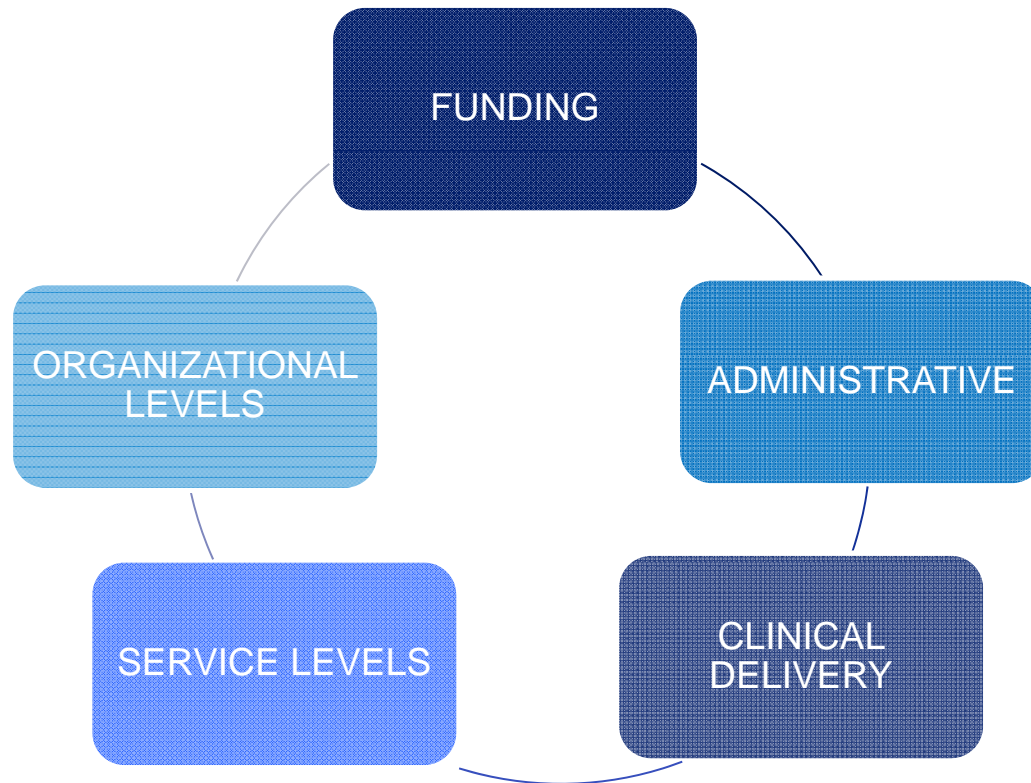
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**Aetna Foundation**

**GIH Webinar**

**October 18, 2011**

# Definition of Integrated Health Care



Integrated Health Care includes five domains that create connectivity, alignment and collaboration within the health care system.

# Adverse Impacts of Lack of Integration

## ▪ Poor clinical outcomes

- preventable medical errors cause more deaths than breast cancer, automobile accidents or drowning.<sup>1</sup>

## ▪ Poor patient experience/satisfaction

- improvements in patients' experiences and quality, but no clear linkages between integrated health care and these improvements.<sup>2</sup>

## ▪ High costs resulting from inefficient care

- 30-40% of all hospitalizations are avoidable.<sup>3</sup>
- Almost 20% of Medicare beneficiaries discharged from hospital rehospitalized within 30 days and 34% within 90 days, at a cost of \$17 billion/year.<sup>4</sup>

<sup>1</sup>Hoyert DL, Kung HC, Smith BL. Deaths: Preliminary Data for 2003. National Vital Statistics Reports. 2005;53(15).

<sup>2</sup>Reid RJ, Coleman K, Johnson EA, et al. The Group Health Medical Home at Year Two: Cost Savings, Higher Patient Satisfaction and Less Burnout for Providers. Health Aff. 2010; 29(5):835-843

<sup>3</sup>AP. Better care, pay less: some communities find a way. Sept. 7, 2009. <http://abcnews.go.com/health/wirestory?id8508105&page=2>

<sup>4</sup>Jencks SF, Williams MV, Coleman EA. Rehospitalization among Patients in the Medicare Fee-for-Service Program. NEJM. 360;14:1418-28.

# Integrated Health Care and the Triple Aim: Promoting High-Quality Care

The goals of the Triple Aim<sup>1</sup> can be achieved by integrated health care and align with the goals of the Aetna Foundation of promoting high-quality care.

These goals include:

- Improving health of populations.
- Improving individual experiences of care.
- Reducing per capita costs of health care.

<sup>1</sup> Berwick D., Nolan T, Whittington J., The Triple Aim: Care, Health and Cost, Health Affairs 27, No 3.(2008):759-769

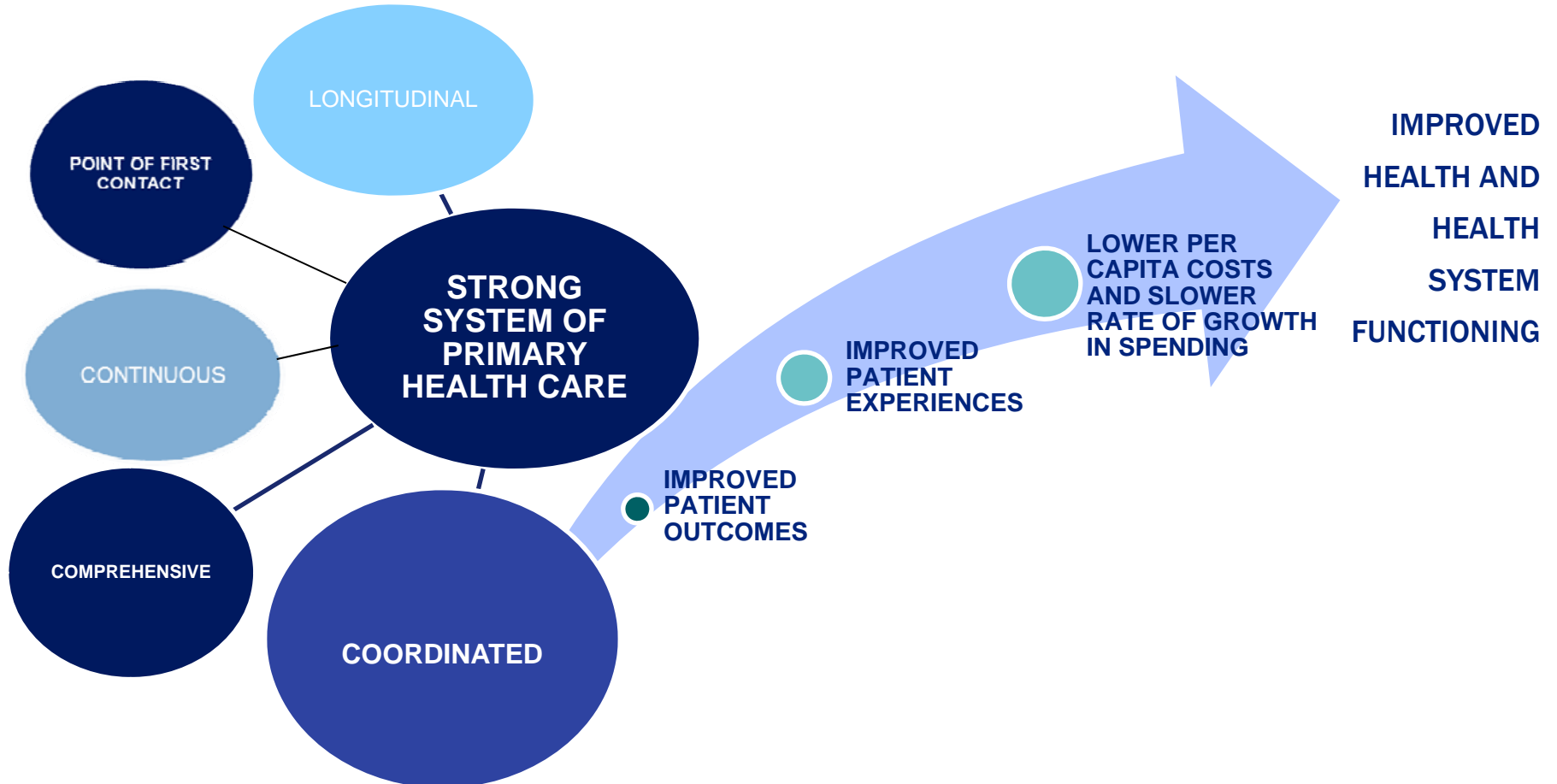
**“Starts with good primary care and the delivery of comprehensive health care services that engage patients, and are well coordinated with good communication among providers.”**

**Care Coordination is a core component of Integrated Health Care (IHC).**

**A high-performing primary care provider is at the center of IHC; and is responsible for directing and managing the delivery of seamless, well-coordinated care for patients.**



A strong system of primary care provides the foundation for care coordination.



## What Role Can Foundations Play?

- **Support Innovation in Clinical Settings**
  - Demonstrations
  - Pilots
- **Identify Already Existing Promising Practices**
- **Dissemination**
  - Convening
- **Research and Evaluation**
- **Payment Policies (Federal, State, Private)**
- **Training**
- **Standards and Measures**



## Integrated Health Care Program Goal

**To promote evidence-based, effective models of care coordination that lead to high-quality, patient-centered, cost-effective health care services and improved health outcomes.**

# Integrated Health Care: Promoting Care Coordination

Raise Awareness



Develop Standards for Care Coordination



Develop Measures of Care Coordination



Identify Promising Practices/Models of Care Coordination

# Integrated Health Care Program: Three Strategies



**Transforming  
Primary Care**

# Integrated Health Care Program: Funded Projects

| FUNDED PROJECTS   | STRATEGIC APPROACHES            |                               |  |
|---|---------------------------------|-------------------------------|--|
|   | STANDARDS FOR CARE COORDINATION | MEASURES OF CARE COORDINATION | PROMISING PRACTICES/ MODELS OF CARE COORDINATION |
| <b>BAYLOR COLLEGE OF MEDICINE</b><br>Medical Home Care and Children with Special Health Care Needs                            |                                 | X                             | X  |
| <b>MASSACHUSETTS GENERAL HOSPITAL</b><br>Transforming Primary Care for Diverse Adults and Children with Chronic Conditions    |                                 | X                             | X  |
| <b>RAND</b><br>Quantifying the Cost of Poor Care Coordination   | X                               | X                             |  |
| <b>UNIVERSITY OF CALIFORNIA, SAN FRANCISCO</b><br>Defining and Measuring Integrated Care to Eliminate Inequities in Care      | X                               | X                             | X  |
| <b>UNIVERSITY OF FLORIDA</b><br>The Relationship between Primary Care Medical Homes, Patient Engagement, and Outcomes of Care |                                 | X                             | X  |
| <b>NATIONAL PUBLIC HEALTH AND HOSPITAL INSTITUTE</b><br>Integrated Health Care for Vulnerable Populations: Supporting         | X                               | X                             | X  |

**THANK YOU  
AND  
DISCUSSION**