

## **Inviting Big Ideas for Health Care Transformation—A point of view: Satish Gattadahalli, Manager, Health Care Transformation, Whitney Bradley and Brown, Inc.**

Health Care is undergoing profound change in the U.S. It has become an economic issue-- 16% of our GDP and estimated to rise to 20% in about 5-6 years. Separate and aside from the Obama administration's central reform theme, and recent passage of stimulus act/ARRA, companies, governments, and citizens nationwide are self-organizing, collaborating, and promoting transformational ideas. Among them:

- 1) Increasing adoption of Health Information Technology-- beginning to address digital divide among practices in rural areas, and small to mid-size physician practices via HIT standards, product availability and certification, policies, incentives, and such. Perhaps, paving the launch of an *Emerging Health Information Economy!* Other impactful technology trends being considered: RFID, cloud computing, mobile/smart phones, mobile care, smart implants, telemedicine, predictive informatics, natural language processing, semantic web, and ubiquity of broadband.
- 2) Fundamentally improving business processes and workflows in hospitals, payer institutions, big pharma, biotech, etc-- to remove waste, and dramatically improve turnaround times (payment of claims, improving access to care, time to market for pharmaceutical drugs, optimal resource utilization, enhanced usability, reducing length of stay, improving throughput, etc). Examples, applying lean practices and simulation tools.
- 3) Learning from other industries and benchmarking for best practices-- e.g., VISA, FedEx, Wal-Mart, Amex, Veterans Health, Intermountain Health, Kaiser Permanente, Geisinger Health, Mayo Clinic, Cleveland Clinic, IHI, AHRQ, etc.
- 4) Empowering patients and providers alike with integrated personal health records, social networking, physician portals, and other support tools--- Examples, Google Health, Microsoft Vault, Dossia, VHA's MyHealthVet, Sermo.com, patientslikeme.com, cardiovascularcs.org, and ozmosis.com.
- 5) Reorganizing care along major disease conditions. Publishing outcomes, quality and performance metrics, and comparative effectiveness results in a transparent manner. Akin to Obama administration's recovery.gov, data.gov and other numerous open government initiatives.
- 6) Fostering innovation in genomics, nanotechnology, robotics, and bionics. Cross-pollinating the fruits of research and evidence back into clinical practice and medicine.
- 7) Advancing our ability to prepare/prevent, mobilize, and respond to public health and biosurveillance incidents.
- 8) Engaging physician community in this grand debate via incentives, malpractice reform.
- 9) Engaging all stakeholders to reduce care variation and maximize the opportunity to standardize benefit packages, reduce costs, improve access, and quality of care.
- 10) Addressing issues of aging, long-term care, and the ability to sustain healthy living.
- 11) Conceiving Health Care as a supply chain and an ecosystem-- prenatal through long-

term care; and addressing Food, Environment, Water, Risk Factors, Wellness, Recreational Activity, and elements that contribute to health and healthy lifestyles.

12) Providing mechanisms for enforcing governance and responsibility—For example, oversight boards for health care quality and patient safety.

These ideas serve as transformational drivers warranting dialog and action. More profoundly, it may provide uncommon insights and potential drivers for health information management needs and policy actions—perhaps shape a provocative concept “Health Information Management for the Emerging Health Information Economy”.